Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

### Filing at a Glance

Company: AXA Equitable Life Insurance Company

Product Name: Equivest SERFF Tr Num: ELAS-127280657 State: Arkansas

TOI: A02.1G Group Annuities - Deferred Non- SERFF Status: Closed-Approved- State Tr Num: 49074

Variable and Variable Closed

Sub-TOI: A02.1G.002 Flexible Premium Co Tr Num: 2011 EV STRAT State Status: Approved-Closed

401(A)

Filing Type: Form Reviewer(s): Linda Bird

Author: Frank E Fernandez Disposition Date: 06/22/2011

Date Submitted: 06/17/2011 Disposition Status: Approved-

Closed

Implementation Date Requested: 07/29/2011 Implementation Date:

State Filing Description:

#### **General Information**

Project Name: Series 901 Third Party Applications Status of Filing in Domicile: Not Filed

Project Number: 2011 EV STRAT 401(a)

Date Approved in Domicile:

Requested Filing Mode: Review & Approval Domicile Status Comments: Due to a recent

change in law, the state of New York no longer

requires filing of this type

Deemer Date:

of form for use outside of New York. Instead, New York now requires that we file annually, a list identifying and describing the policy forms

issued by us for delivery outside New York.

Explanation for Combination/Other: Market Type: Group

Submission Type: New Submission Group Market Size: Small and Large

Group Market Type: Employer Overall Rate Impact:

Filing Status Changed: 06/22/2011

Created By: Frank E Fernandez

Submitted By: Frank E Fernandez

Corresponding Filing Tracking Number:

State Status Changed: 06/22/2011

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

Filing Description:

Please see attached filing letter for details.

### **Company and Contact**

#### **Filing Contact Information**

Gregory Prato, Assistant Vice President greg.prato@axa-equitable.com

 1290 Avenue of the Americas, 14th Floor
 212-314-5710 [Phone]

 New York, NY 10104
 212-314-3380 [FAX]

**Filing Company Information** 

AXA Equitable Life Insurance Company CoCode: 62944 State of Domicile: New York

1290 Avenue of the Americas, 14-10 Group Code: 968 Company Type: LIFE Insurance

New York,, NY 10104 Group Name: State ID Number:

(212) 314-2921 ext. [Phone] FEIN Number: 13-5570651

-----

## Filing Fees

Fee Required? Yes
Fee Amount: \$300.00

Retaliatory? No

Fee Explanation: AR Filing fee of \$50.00 per form. Six apps/enrollment forms = 6\*50= \$300.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

AXA Equitable Life Insurance Company \$300.00 06/17/2011 48814031

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

## **Correspondence Summary**

#### **Dispositions**

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	06/22/2011	06/22/2011

#### **Amendments**

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Variable Text Memorandums	Frank E Fernandez	06/17/2011	06/17/2011
Supporting Document	Filing Letter	Frank E Fernandez	06/17/2011	06/17/2011
Supporting Document	Filing Letter	Frank E Fernandez	06/17/2011	06/17/2011

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

## **Disposition**

Disposition Date: 06/22/2011

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document (revised)	Filing Letter		Yes
Supporting Document	Filing Letter	Replaced	Yes
Supporting Document	Filing Letter	Replaced	Yes
Supporting Document	Variable Text Memorandums		Yes
Form	Application for Equi-vest Strategies		Yes
	401(a) (Series 901)		
Form	401(a) Enrollment Form		Yes
Form	Application for Equi-vest Strategies EDC		Yes
	(Series 901)		
Form	457(b) EDC Enrollment Form		Yes
Form	Application for Equi-vest Strategies TSA		Yes
	(Series 901)		
Form	403(b) TSA Enrollment Form		Yes

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

**Amendment Letter** 

Submitted Date: 06/17/2011

**Comments:** 

Adding Variable Text Memorandums

**Changed Items:** 

**Supporting Document Schedule Item Changes:** 

**User Added -Name: Variable Text Memorandums** 

Comment:

VTM - Gen - 401a Series 901 Employer Application (2009 401(a).pdf

VTM - Gen - 401a SERIES 901 SIO Enrollment Form (GENERIC) - 6-15-2011.pdf

VTM - Gen -TSA SERIES 901 Enrollment Form (GENERIC).pdf

VTM - Gen - EDC SERIES 901 Employer Application.pdf

VTM - Gen - EDC SERIES 901 Enrollment Form (GENERIC).pdf

VTM - Gen - TSA SERIES 901 Employer Application - 3rd Party App Backup 6-14-2011.pdf

SERFF Tracking Number: ELAS-127280657 State: Arkansas

Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 49074

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

**Amendment Letter** 

Submitted Date: 06/17/2011

Comments:
Additional error.
Changed Items:

**Supporting Document Schedule Item Changes:** 

User Added -Name: Filing Letter

Comment: Corrected error on filing letter (wrong filing for TSA product).

AR EQ 901 TPA Filing Ltr Comick Lisa.pdf

SERFF Tracking Number: ELAS-127280657 State: Arkansas

Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 49074

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

**Amendment Letter** 

Submitted Date: 06/17/2011

Comments:

corrected filing letter

**Changed Items:** 

**Supporting Document Schedule Item Changes:** 

User Added -Name: Filing Letter

Comment: Corrected error on filing letter (wrong filing for TSA product).

AR EQ 901 TPA Filing Ltr Comick Lisa.pdf

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

#### Form Schedule

Lead Form Number: 2011 EV STRAT 401(a)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	2011 EV STRAT 401(a)		/Application for Equivest Strategies 401(a) (Series 901)	Initial		0.000	Gen - Application - 2011 EV STRAT 401(a).pdf
	EV STRAT 401(a) 2011	Application, Enrollment Form	/401(a) Enrollment Form	Initial		0.000	Gen - Enrollment Form - EV STRAT 401(a) 2011.pdf
	2011 EV STRAT EDC		Application for Equivest Strategies EDC (Series 901)	Initial		0.000	Gen - Application - 2011 EV STRAT EDC.pdf
			/457(b) EDC Enrollment Form	Initial		0.000	Gen - Enrollment Form - EV STRAT EDC 2011.pdf
	2011 EV STRAT TSA		Application for Equivest Strategies TSA (Series 901)	Initial		0.000	Gen - Application - 2011 EV STRAT TSA.pdf
			/403(b) TSA Enrollment Form	Initial		0.000	Gen - Enrollment Form - EV STRAT TSA

SERFF Tracking Number: ELAS-127280657 State: Arkansas

Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 49074

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

2011.pdf

# AXA EQUITABLE LIFE INSURANCE COMPANY

## APPLICATION FOR EQUI-VEST STRATEGIES 401(a) (SERIES 901) GROUP FLEXIBLE PREMIUM COMBINATION FIXED AND VARIABLE DEFERRED ANNUITY CONTRACT

(Consisting of Parts A and B)

Part A		
Section I - Application and	Agreement for Participation in EOU	I-VEST® Strategies Contract

I. Market for EQUI-VEST	401(a) Plans of gove				errals under IRC section	1401(k)):	
Strategies	. ,	_	oyers (not s	altable for dele	irais under the section	1 +01(K)).	
Contract	☐ Profit Sharing Pla						
	☐ Money Purchase	Pension Plan					
2. Employer and Plan Information	Employer's Name:						
ziii() iiiati()i	Employer's Address	:					
	18, 18 18 18 18 18 18 18 18 18 18 18 18 18	Number and	Street (If no	n-U.S., Registe	red Representative mus		.)
		Attention	1=	,			
		City		State	Zip Code		
	Employer's Taypaye	r Identification	n Number				
	Employer's Taxpaye	1 14011111041101					
	Plan Name:		4				
	Plan Contact Person	Name:					
	Telephone Number:			extensi	on		
	<b>.</b>						
3. Broker of	Name:					est for the s	
Record's Name and	Code Number:						
Code Number	Code Number:						
	CV #:	(For Intern	al Use Onl	v)			
4.	Indicate the date the	Plan went into	o effect.				
Plan Effective Date							
	YearMo	nth	Day				

5. Administrative Charge Payment  6. Designated Plan	Annual Administrative Charge for each Certificate on the last day of each Participation Year is to be:  Deducted from each Participant's Account Value Paid by the Employer  Note: Plans that elect to pay the annual administrative charge must have a minimum of 5 Participants at the time the Unit is established.
Administrator	Name of Plan Administrator Telephone Number
(If other than the Employer)	Address City State Zip Code
	Contact Person Name, Title Email Address Fax Number
7. Designated Plan Administrator Fee	If a Designated Plan Administrator is indicated, the Plan Administrator's fee is to be deducted from each Participant's Account Value:   Yes  No  If yes, indicate amount for each Participant:   Frequency:  Annually  Quarterly  Monthly
8. Frequency of Plan Contributions	□Monthly □Semi-Monthly □Bi-Weekly ☐ ③
9, Loan Information	Does the Plan permit Participants to take loans?    Yes    No  Unless you or your designee provides us with the loan interest rate on Participant loan requests, AXA Equitable will set the loan interest rate. We will use the rate as published in the Wall Street Journal for the Prime Interest Rate +1.00% on a calendar monthly basis.  Does the plan have a limit on the number of loans that a Participant can have under this Contract?  Yes    No  If Yes, please provide the maximum number of loans permitted under the Plan:
10. In-Service Withdrawal Information	Does the Plan permit Participants to take In-Service Withdrawals? □Yes □No

11. Direct Rollovers, and Direct Transfers	Does the Plan permit:  Direct Rollover Contributions □ Yes □ No  Plan-to-Plan Direct Transfer Contributions □ Yes □ No
12. Transaction Authorization	Please indicate whether or not Participants are authorized to execute the following transactions without the Employer's approval:  Investment Option Transfers Allocation Changes Uyes No Uyes No Uyes No
13. Authorization Information	Please provide us with the individual(s) authorized to approve transaction(s) (i.e. loans, withdrawals etc.):  Name:  Signature:
	Telephone Number: Effective Date:
14. Investment Options Methods	Please select the investment option method that will be available to Plan Participants (select only one):  (a) □ Make their own investment choices (Either Maximum Transfer Flexibility, or Maximum Investment Option Choice)  (b) □ Have Maximum Transfer Flexibility  (c) □ Have Maximum Investment Option Choice
15. Existing Plan Assets	Upon takeover, are existing Plan assets being transferred to an unallocated account maintained by the Contract until such Plan assets can be allocated to the Certificates of the Participants? □Yes □No
16. Sources of Contribution	Indicate which sources (Contribution types) can be made under this Plan.  For Internal Use Only
	i. Employer Contributions:
	<ul> <li>ii. □ Employee 414(h) Pre-Tax Contribution - Mandatory:</li> <li>iii. □ Prior Plan:         (Direct Transfer from another 401(a) plan or rollover from another eligible retirement plan)</li> <li>iv. □ Prior Pension Plan:</li> </ul>
	(Transfer of assets from another qualified plan of the same employer). Are there unvested

e		
cl		

Period of Vesting Service	Schedule A	Schedule B	Schedule C	Schedule D	Schedule E	Schedule F	Schedule G TBD by Client
< 1 Year	0%	0%	0%	0%	0%	0%	
1 - 2 Years	100%	0%	0%	0%	0%	0%	
2 - 3 Years	100%	100%	0%	0%	0%	20%	
3 - 4 Years	100%	100%	100%	0%	0%	40%	
4 - 5 Years	100%	100%	100%	100%	0%	60%	
5 - 6 Years	100%	100%	100%	100%	100%	80%	
6 Years or >	100%	100%	100%	100%	100%	100%	€.

#### Section II - Plan Location and Contribution Reminder Statement Information

Note: This Section must be completed if the Plan wants to receive Contribution Reminder Statements. If the Plan has more than one location that wants to receive a Contribution Reminder Statement, a fully completed Section II is required for each location designated. A copy of Section II may be reproduced locally.

<b>01 000</b>	resignated. It copy of Beetion It may be reproduced to daily.	_
18. Plan Location Information	Does the location request Contribution Statements? □Yes □No	
Airoi macion	Is the Location Name the same as the Employer Name? □Yes □No	
	Is the Location Address the same as the Employer Address?	
	If either the Location Name or Address is different from the Employer Name or Address please complete the following:	
	Location Name:	
	Attention of:	
	Location Address:  Number and Street	
	Number and Street	
	City State Zip Code	
19. Contribution	Information for the Contribution Statements:	
Statements	a. Contribution Due Date (choose the 1st through 28th of the month)	
	Month Day	
	b. Please indicate the frequency in which Contribution Statements are to be forwarded to you.	
	□ Monthly □ Semi-Monthly □ Bi-Weekly	
	Please note: The contribution frequency does not have to be the same for all locations.	
	c. Indicate how you wish to have the Contribution Statement produced:  Alphabetical order	
	□ Certificate Number order	
	☐ Social Security Number order	
	<ul> <li>d. Do you want the contribution amount(s) to be printed on the Contribution Statements?</li> <li>□ Yes</li> <li>□ No</li> </ul>	
20.		_
Location	Location Contact Person:	
Contact Information		
III.	Location Contact Person's Telephone Numberextension	
21.		_
Mailing	Confirmation Notices and Statements of Account will be mailed to the Participants.	
Information	Confirmation 1100000 time Distributes of 11000 time will be mailed to the 1 acceptance.	

FOF	RP	RO	CESSII	NG	USE	ONLY	Y:
-----	----	----	--------	----	-----	------	----

PLAN ID:	LOCATION	
2011 EV STRAT 401(a)		<b>AXA Distributors, LLC</b>

Section III - Basic	Installation Information
22.	
Administration	Type of Employer Organization:
	Governmental Entity
	□ IRC 501(c)(3) Organization

Certain Contract Provisions

I. Investment Options - (Contract Section 2.01)

The Investment Options currently available under the Contract are listed in Attachment A. One of the following two methods for selecting your Investment Options is available under the Contract:

- 1) Maximum Investment Options: Participants may allocate Contributions or transfer funds to both Type A and Type B Investment Options. The Options currently available are listed in Attachment A (the Investment Options Chart). However, there will be restrictions on the amounts that can be transferred out of the Guaranteed Interest Option.
- 2) Maximum transfer flexibility: Participants may allocate Contributions to any available Investment Options under Type A. No restrictions will apply to amounts that can be transferred out of the Guaranteed Interest Option.
- II. Guaranteed Interest Option (Contract Section 2.02)
  Minimum Guaranteed Interest Rate: Not less than 1% and not more than 3%.
- III. Minimum Aggregate Contributions (on an annual basis) (Contract Section 3.01) \$0 \$5 Million
- IV. Allocations (Contract Section 3.02)

Restrictions on Allocations into the Guaranteed Interest Option: No more than 25% of any contribution may be allocated to the Guaranteed Interest Option. We may suspend these allocation restrictions upon notice to you. We will advise you of any such liberalization. We will also advise you at least 45 days in advance of the day we intend to reimpose any such restrictions, unless we have previously specified that date when we notified you of the liberalization.

V. Transfer Rules – (Contract Section 4.02)

The provisions of Section 4.02 of the Contract shall govern except that the maximum percentage of the amount in the Guaranteed Interest Option, which may be transferred, as described in Section 4.02 of the Contract, is the greater of 25% or the total amount transferred during the previous twelve months.

Restrictions on Transfers into the Guaranteed Interest Option: Transfers into the Guaranteed Interest Option will not be permitted if it would result in more than 25% of the Annuity Account Value to be in the Guaranteed Interest Option. We may suspend these transfer restrictions upon notice to you. We will advise you of any such liberalization. We will also advise you at least 45 days in advance of the day we intend to reimpose any such restrictions, unless we have previously specified that date when we notified you of the liberalization.

VI. Withdrawal Charges – (Contract Section 9.01)

For Plans subject to a Withdrawal Charge, each Participation Year, the Participant is permitted to withdraw up to 10% of the Annuity Account Value (less any prior withdrawals and associated withdrawal charges in the current Participation Year, [and less any amount in the Loan Reserve Account]) without incurring a Withdrawal Charge.

The Withdrawal Charge will be assessed as a percentage of the amount withdrawn starting from the Participation Date of each Participant's Certificate as follows:

- 10 Years: 6%, 6%, 6%, 6%, 6%, 5%, 4%, 3%, 2%, 1%, or
- 7 Years: 6%, 6%, 5%, 4%, 3%, 2%, 1%, or
- 5 Years: 5%, 5%, 5%, 5%, 5%, or
- None, or



The Withdrawal Charge will be assessed as a percentage of each Contribution withdrawn attributable to Contributions made during the current and five prior Participation Years based on the following percentages:

- 5%, 5%, 5%, 5%, 5%, 5%, or
- 5%, 5%, 5%, 5%, 5%, 5% until the beginning of the 13th Participation Year when the charge becomes zero, or

The Withdrawal Charge will be assessed as a percentage of the amount withdrawn from each Participant's Certificate starting from the Contract Date of the Group Contract as follows:

5 Years: 5%, 5%, 5%, 5%, 5% 3 Years: 6%, 6%, 6%



#### No withdrawal charge will apply when: (Standard Waivers)

1) Tafter 5 Participation Years, the Participant reaches age 55 and severs from employment; or

2) I the later of the completion of at least five Participation Years and the Participant's attainment of

- a request is made for a refund of a Contribution in excess of the amount that may be contributed under Section 401(a) of the Code within one month of the date on which the Contribution is made; or
- the Participant's attainment of age 55, the completion of at least five Participation Years and the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase an eligible Annuity Certain; or
- 5) the Participant's completion of at least three Participation Years and the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase a Period Certain Annuity, where the certain period of such annuity is least ten years; or
- the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase a life annuity distribution, pursuant to the terms of this Contract; or
- the Participant dies and a death benefit is payable to the Beneficiary; or
- 8) the withdrawal is made to satisfy minimum distribution requirements under Code Section 401(a)(9); or
- the Participant elects a withdrawal that qualifies as a hardship withdrawal under the Code; or
- 10) the Participant has qualified to receive Social Security disability benefits as certified by the Social Security Administration; or
- 11) AXA Equitable receives proof satisfactory to us that the Participant's life expectancy is six months or less, and such proof must include, but is not limited to, certification by a licensed physician; or
- 12) the Participant has been confined to a nursing home for more than 90 days (or such other period, as required in your state) as verified by a licensed physician. A nursing home for this purpose means one that is (a) approved by Medicare as a provider of skilled nursing care service, or (b) licensed as a skilled nursing home by the state or territory in which it is located (it must be within the United States, Puerto Rico, U.S. Virgin Islands, or Guam) and meets all of the following:
  - its main function is to provide skilled, intermediate, or custodial nursing care;
  - it provides continuous room and board to three or more persons;
  - it is supervised by a registered nurse or licensed practical nurse;
  - it keeps daily medical records of each patient;
  - it controls and records all medications dispensed; and
  - its primary service is other than to provide housing for residents.

The withdrawal charge will apply if the condition as described in items 10 through 12 existed at the time the [Participant's Certificate is issued][Contract is issued] or if the condition began within the 12 month period following the issuance of the [Participant's Certificate] [Contract].

(Benefit Sensitive Waiver)

13) the Participant severs from employment.



- VII. Third Party Transfer (Contract Section 9.02)

  Currently \$25. AXA Equitable reserves the right to charge a maximum of \$65 for each occurrence of a withdrawal for any reason, to cover administrative processing costs.
- VIII. Annual Administrative Charge (Contract Section 9.04)
  If applicable, the annual administrative charge will be deducted from each certificate on the last day of each Participation Year as follows:
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$30; waived at an annuity account value of \$15,000 or more, or
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$30; waived at an annuity account value of \$25,000 or more, or
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$15; waived at an annuity account value of \$15,000, or more, or
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$15; waived at an annuity account value of \$25,000, or more, or
  - None
- IX. Variable Separate Account Charge (Contract Section 9.06) 0.00% 2.00%
- X. | Participant Accounts (Contract Section 8.01) and Termination of the Contract (Contract Section 11.08)

  Participant consent is required for the Employer to make withdrawals from or terminate a Participant's account under the Contract. It is the Employer's responsibility to obtain Participant consent.

# Acknowledgements and Agreement

When you sign this Application, you are agreeing to the elections that you have made in this Application and acknowledge that you understand the terms and conditions set forth in this Application.

By signature(s) on the next page of duly authorized person(s), the Employer and or the Trustee(s) if applicable, hereby:

- 1. Tacknowledge having received and read the most current EQUI-VEST Strategies Prospectus and the Prospectus Supplement(s) for participation under the Contract.
- acknowledge, understand and agree to: the elections made in this Application, the various levels of fees, charges, and funding arrangements under the Contract.
- 3. apply for participation in the Contract as funding vehicle for the Plan;
- 4. agree to be bound by the terms and conditions of the Contract;
- 5. acknowledge and understand that no Registered Representative has authority to make or modify any contract or agreement on AXA Equitable's behalf, or to waive or alter any of AXA Equitable's rights or requirements; and
- 6. acknowledge and agree that the provisions contained in this Application and the Contract issued upon acceptance of this Application by AXA Equitable supersede all prior agreements that may have previously been entered into between the Employer and AXA Equitable.
- 7. acknowledge, understand and agree that all forfeiture funds, if any, will be re-allocated among remaining Participants to offset future Employer contributions.
- 8. acknowledge, understand and agree that assets transferred from a prior funding vehicle are received by AXA Equitable, such assets will be deposited as one lump sum to an Unallocated Account in the Guaranteed Interest Option. Assets shall remain in this account until all forms are completed and until all information needed to complete the transfer is received by AXA Equitable. With respect to each Participant, AXA Equitable will allocate amounts to each Participant's Certificate only after you provide instructions that are acceptable and necessary in order to complete the allocation process. Once all the necessary information is received and has been determined to be acceptable by AXA Equitable, AXA Equitable will allocate such amounts to each Participant's Certificate. You are solely responsible for effectuating the asset transfer in accordance with all applicable laws and regulations.
- 9. understand that by identifying the Designated Plan Administrator (page 4) and signing on the next page, the Employer and or the Trustee(s) are authorizing AXA Equitable to provide information regarding the Plan and Plan Participants to them.
- 10. understand that the Annuity Account Value attributable to allocations to the Variable Investment Options may increase or decrease and are not guaranteed as to dollar amount.
- 11. understand that the Employer's legal counsel and/or advisor should determine that there are no local or state laws, rules and/or regulations which prohibit the investment of Plan assets in the Contract and in the Investment Options indicated on **Attachment A** of this application.



	FOR CONTRACT HOLDER(S): (If the Contraction III, complete (a) below; If the Contraction (a) and (b) below.)	ontract Holder <b>is</b> the Em act Holder <b>is other than</b>	ployer or the Trust as a the Employer or the Tr	lefined in ust, complete
	(a)Print Name of Authorized Individual/I	Employer	City	State
	BySignature and Title of Authorized Ind	ividual/Employer		Date
	(b)	Trustee	City	State
	By	ividual/Employer		Date
Accepted for AXA Equitable  (To be completed by the AXA	ACCEPTED FOR AXA EQUITABLE:	By		y Casad W Walter Common Common Common Common
Equitable Processing Office)	Print Name of Authorized Signatory  Effective Date:  Group Annuity Contract No	Signature of Author	ized Signatory	
	A copy of the Contract, the Applicat Charges), and Investment Options C to the Contract Holder after review. the Contract. Initial contributions wi installation documents have been ap	hart, will be signed be All returned documentall be accepted by A	oy AXA Equitable a ents will govern the A Equitable only a	and returned coperation of after

## Attachment A - Investment Options Chart (Series 901)

Type B	Type A	
AXA Conservative Allocation	Guaranteed Interest Option	Fidelity® VIP Contrafund®
AXA Conservative-Plus Allocation	All Asset Allocation	Fidelity® VIP Equity Income
EQ/Core Bond Index	American Century VP Mid Cap Value	
ACCUMANTAL SECTION OF THE SECTION OF	Fund	Fidelity VIP Mid Cap
EQ/Franklin Core Balanced	AXA Aggressive Allocation	Goldman Sachs VIT Mid Cap Value
EQ/Global Bond PLUS	AXA Moderate Allocation	Invesco V.I. Dividend Growth
EQ/Intermediate Government Bond	AXA Moderate-Plus Allocation	
Index		Invesco V.I. Global Real Estate
EQ/Money Market	AXA Tactical Manager 400	Invesco V.I. International Growth
EQ/PIMCO Ultra Short Bond	AXA Tactical Manager 500	Invesco V.I. Mid Cap Core Equity
EQ/Quality Bond PLUS	AXA Tactical Manager 2000	Invesco V.I. Small Cap Equity
Invesco V.I. High Yield	AXA Tactical Manager International	Ivy Funds VIP Energy
Ivy Funds VIP High Income	EQ/AllianceBernstein Small Cap Growth	Ivy Funds VIP Mid Cap Growth
Multimanager Core Bond	EQ/AXA Franklin Small Cap Value Core	Ivy Funds VIP Small Cap Growth
Multimanager Multi-Sector Bond	EQ/BlackRock Basic Value Equity	Lazard Retirement Emerging Markets Equity
PIMCO VIT CommodityRealReturn®	EQ/Boston Advisors Equity Income	MFS® International Value
Strategy	TO (G.1 . G. : 11 P	MFS International Value MFS® Investors Growth Stock
	EQ/Calvert Socially Responsible	MFS investors Growth Stock MFS® Investors Trust
	EQ/Common Stock Index	MFS Technology
	EQ/Davis New York Venture	MFS Technology MFS® Utilities
	EQ/Equity 500 Index	
	EQ/Equity Growth PLUS	Multimanager Aggressive Equity  Multimanager International Equity
	EQ/Franklin Templeton Allocation	Multimanager International Equity  Multimanager Large Cap Value
	EQ/GAMCO Small Company Value	Multimanager Mid Cap Growth
	EQ/Global Multi-Sector Equity	Multimanager Mid Cap Growth  Multimanager Mid Cap Value
	EQ/International Core PLUS	Multimanager Small Cap Growth
<u> </u>	EQ/International Equity Index EQ/International Value PLUS	Multimanager Small Cap Value
	EQ/International Value PLOS EQ/JPMorgan Value Opportunities	Multimanager Technology
	EQ/JPMorgan Value Opportunities  EQ/Large Cap Core PLUS	Oppenheimer Main Street Fund®/VA
	EQ/Large Cap Growth Index	Structured Investment Option
	EQ/Large Cap Growth PLUS	Target 2015 Allocation
	EQ/Large Cap Value Index	Target 2025 Allocation
	EQ/Large Cap Value PLUS	Target 2035 Allocation
	EQ/Lord Abbett Large Cap Core	Target 2045 Allocation
	EQ/MFS International Growth	Templeton Global Bond Securities
	EQ/Mid Cap Index	Van Eck VIP Global Hard Assets
	EQ/Mid Cap Value PLUS	
	EQ/Montag & Caldwell Growth	
	EO/Morgan Stanley Mid Cap Growth	
	EQ/Mutual Large Cap Equity	
	EQ/Oppenheimer Global	
	EQ/Small Company Index	
	EQ/T. Rowe Price Growth Stock	
	EQ/Templeton Global Equity	
	EQ/Van Kampen Comstock	

## **AXA Equitable Life Insurance Company AXA Distributors, LLC**

EQUI-VEST<sup>®</sup> Strategies<sup>SM</sup> (Series 901) \_\_\_\_\_\_ Combination Fixed and Variable Deferred Annuity 401(a) Enrollment Form

EV STRAT 401(a) 2011



JPMorganChase

4 Chase Metrotech Center, 7th Floor NY Remit One Image Lockbox # 13463 Brooklyn, NY 11245-0001

Regular Mail: (with money): **EQUI-VEST Unit Annuity Lockbox** P.O. Box 13463 Newark, NJ 07188-0463



Express Mail: (without money): EOUI-VEST New Business 100 Madison St., Suite 1000 Syracuse, NY 13202

Regular Mail: (without money): EOUI-VEST New Business P.O. Box 4704, Syracuse, NY 13221-4704 For Assistance, please call 800-628-6673

ADL 401(a) Enrollment Form Cat. No. (xxxxxx. (5/11) Page 1 of 5

1. Employer information		3. Beneficiary(ies) information (continued)
Employer/and (or) School Name/Unit Name		2
Unit Number		Relationship to Participant:
Child Marinet		☐ Spouse: Male ☐ Female ☐
2. Participant information (Check appropri	ate boxes)	Child: Male Female C
If your Mailing Address is different from the Prim Address below, please provide your Mailing Addr you have moved within the last 12 months, pleas previous address in the Special Instructions sect	ess in Section 8. If e indicate your	T.I.N.: S.S.N.  or E.I.N.  Contingent
☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Other		
☐ Male ☐ Female		Tirst Name Last Name %
Social Security Number (Required		Relationship to Participant:  Spouse: Male  Female   Child: Male  Female   Other:
First Name Middle Initial Home	Last Name	T.I.N.: S.S.N.
□ Work		
Birth Date (mm/dd/yy) Age at Nearest Birthday	Daytime Phone Number	4. Optional feature Enhanced Death Benefit  If you would like to elect the Enhanced Death Benefit, please check the
U.S.A. Primary Residential Address — No P.O. Box Permitted		following box:
		☐ YES, I would like to elect the Enhanced Death Benefit.
City State	Zip Code	5. Contribution amount  If a payment will be forwarded at a later date, you must complete #5A and, if
Email Address (optional)		applicable, #5B. If a payment will be provided when the application is signed, complete #5C only.
Vesting Start Date Date of Hire		A. Expected first-year contribution: \$
Valid Driver's License No./State Issued ID # State	Exp. Date	(Exclude direct transfer or rollover amounts)
valid billion of 2001100 Howard to todad ib a	Exp. Date	B. Expected direct transfer or rollover amounts: \$
U.S. Citizen? $\square$ Yes $\square$ No (If No, complete below a U.S. Visa or Permanent Resident card)	nd attach copy of	(i) If you intend to allocate all or a portion of this amount to Special Dollar Cost Averaging, also complete #7
		(ii) If this is a rollover, is it from a 401(k) plan or other eligible retirement plan?
Country Passport #/Resident Card #	U.S. Visa Type	☐ Yes ☐ No
3. Beneficiary(ies) information		C. Amount provided with this enrollment form:  (i) Total amount for investment options
Primary		listed in #6. \$
1 Last Name	%	(ii) Provide a breakdown of employee and employer contributions. \$ \$ Employee Employer
		Employee Employer
Relationship to Participant:  Spouse: Male Female C Child: Male Female C Other:		Approximation of the second of
T.I.N.: S.S.N.		

X03573\_core

	lectio rcent	n of investment options and allocation ages				
Must	check	either Box A or Box B, but not both.				
A.   Maximum Transfer Flexibility. By checking this box, you may invest in the investment options listed in this section which are not boxed off. Transfers out of the Guaranteed Interest Option will not be limited.						
		ocation (Applies to Boxes A and B): Select the allocation				
		atributions indicated in #5A or any amounts that you may				
inv	est in th	nese investment options in the future. You can change this				
		for future contributions at any time. The percentages				
ent	ered be	low must be in whole numbers and total 100%.				
Contrib	ution A	llocation				
Structur	ed Inve	estment Option Segment				
VII MVIMI	%	S&P 500 1year -10% Buffer (V1*)				
•		Although not required, you have the ability to choose a				
		Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete				
14	)	the Performance Cap Threshold and Maturity Instructions				
	/	Election Form (#146946). The completed form must be				
		submitted alorig with this application to our Processing Office.				
	Part of	4 T 10 T 1				
Asset A	llocatio	☐ I want to choose a Performance Cap Threshold.				
AXA All						
		AXA Aggressive Allocation (18*)				
		AXA Moderate Allocation (T4*)				
	%	AXA Moderate-Plus Allocation (17*)				
Target A						
		Target 2015 Allocation (6G*)				
		Target 2025 Allocation (6H*) Target 2035 Allocation (6I*)				
	%	Target 2035 Allocation (6)*)				
Other A						
	%	All Asset Allocation (7H*)				
	%	EQ/Franklin Templeton Allocation (6P*)				
Large C						
	%	AXA Tactical Manager 500 (7M*)				
	% %	EQ/BlackRock Basic Value Equity (81*) EQ/Boston Advisors Equity Income (33*)				
	%	EQ/Calvert Socially Responsible (92*)				
		EQ/Common Stock Index (T1*)				
	%	EQ/Davis New York Venture (6Q*)				
		EQ/Equity 500 Index (TE*)				
	%	EQ/Equity Growth PLUS (94*)				
	% %	EQ/JPMorgan Value Opportunities (72*) EQ/Large Cap Core PLUS (85*)				
	% %	EQ/Large Cap Growth Index (82*)				
	%	EQ/Large Cap Growth PLUS (77*)				
	%	EQ/Large Cap Value Index (49*)				
1. 14 m J		EQ/Large Cap Value PLUS (89*)				
· · · · ·		EQ/Lord Abbett Large Cap Core (05*)				
		EQ/Montag & Caldwell Growth (34*)				
	% %	EQ/Mutual Large Cap Equity (6F*) EQ/T. Rowe Price Growth Stock (32*)				
	%	EQ/Van Kampen Comstock (07*)				
	%	Fidelity® VIP Contrafund® (7R*)				
	%	Fidelity® VIP Equity Income (7S*)				
		MFS® Investors Growth Stock (81*)				
		MFS® Investors Trust (7P*)				
	% ~%	Multimanager Aggressive Equity (T2*)				
	% %	Multimanager Large Cap Value (58*) Oppenheimer Main Street Fund®/VA (7Q*)				
		-FF				

Small/Mid Cap	Stocks
%	American Century VP Mid Cap Value (7V*)
%	AXA Tactical Manager 400 (7L*)
%	AXA Tactical Manager 2000 (7K*)
%	EQ/AllianceBernstein Small Cap Growth (TP*)
%	EQ/AXA Franklin Small Cap Value Core (6E*)
% %	EQ/GAMCO Small Company Value (37*) EQ/Mid Cap Index (55*)
	EQ/Mid Cap Value PLUS (79*)
%	EQ/Morgan Stanley Mid Cap Growth (08*)
%	EQ/Small Company Index (97*)
%	Fidelity® VIP Mid Cap (7U*)
%	Goldman Sachs VIT Mid Cap Value (7W*)
%	Invesco V.I. Mid Cap Core Equity (7T*)
%	Invesco V.I. Small Cap Equity (7X*)
%	lvy Funds VIP Mid Cap Growth (8M*)
%	Ivy Funds VIP Small Cap Growth (7Y*)
% %	Multimanager Mid Cap Growth (59*) Multimanager Mid Cap Value (61*)
%	Multimanager Small Cap Growth (36*)
%	Multimanager Small Cap Value (91*)
International S	
%	AXA Tactical Manager International (7N*)
%	EQ/Global Multi-Sector Equity (78*)
%	EQ/International Core PLUS (88*)
%	EQ/International Equity Index (TN*)
%	EQ/International Value PLUS (73*)
%	EQ/MFS International Growth (26*)
%	EQ/Oppenheimer Global (6A*)
% %	EQ/Templeton Global Equity (6D*) Invesco V.I. International Growth (7Z*)
%	Lazard Retirement Emerging Markets Equity (8H*)
%	MFS® International Value (8A*)
%	Multimanager International Equity (65*)
AXA Allocatio	n (Not available under Max Flex option)
	· (175;
<b></b> %	
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7. Special Dollar Cost Avera	ging (Special DCA)	Multimanager Aggressive Equity (12")
Only available for direct transfer an	nd rollover contributions. Choose	Multimanager Large Cap Value (58*)
one time period. 100% of the contribu		% Oppenheimer Main Street Fund®/VA (7Q*)
allocated to Special DCA unless you s	specify a dollar amount for the time	Small/Mid Cap Stocks
period selected.		% American Century VP Mid Cap Value (7V*)
☐ 3-months: ☐ 100% Allocation	on <u>or</u>	AXA Tactical Manager 400 (7L*)
# was		% AXA Tactical Manager 2000 (7K*)
☐ 6-months: ☐ 100% Allocation	on <u>or</u>	% EQ/AllianceBernstein Small Cap Growth (TP*)
☐ 12-months: ☐ 100% Allocation	on <u>or</u>	% EQ/AXA Franklin Small Cap Value Core (6E*)
		EQ/GAMCO Small Company Value (37*)
Use the Special DCA allocation colu		% EQ/Mid Cap Index (55*)
transferred under the Special DCA	program. You cannot select more	% EQ/Mid Cap Value PLUS (79*)
than 10 investment options.		EQ/Morgan Stanley Mid Cap Growth (08*)
If only allocating a portion of the direc	t transfer or rollover to Special	EQ/Small Company Index (97*)
DCA, you must complete the contribut	tion allocations listed in #6.	% Fidelity® VIP Mid Cap (7U*)
Note: Your choice of Maximum Transf	fer Flexibility or Maximum Fund	Goldman Sachs VIT Mid Cap Value (7W*)
Choice as indicated in #6 will also app	ply to the investment options listed	% Invesco V.I. Mid Cap Core Equity (7T*)
in this section.		% Invesco V.I. Small Cap Equity (7X*)
		% Ivy Funds VIP Mid Cap Growth (8M*)
Special DCA Allocation		lvy Funds VIP Small Cap Growth (7Y*)
Structured Investment Option Segme	ent ı	% Multimanager Mid Cap Growth (59*)
% S&P 500 1year	-10% Buffer (V1*)	Multimanager Mid Cap Value (61*)
Although not required,	, you have the ability to choose a	Multimanager Small Cap Growth (36*)
Performance Cap Three	eshold. To choose your Performance	Multimanager Small Cap Value (91*)
	e check the box below and complete	International Stocks/Global
the Performance Cap	Threshold and Maturity Instructions	% AXA Tactical Manager International (7N*)
Election Form (#14694	46). The completed form must be	% EQ/Global Multi-Sector Equity (78*)
Submitted along with the Office.	his application to our Processing	EQ/International Core PLUS (88*)
	Doufomana One Throughold	% EQ/International Equity Index (TN*)
I a second secon	Performance Cap Threshold.	% EQ/International Value PLUS (73*)
Note: if you elect the	Structured Investment Option as	% EQ/MFS International Growth (26*)
part of your allocation	percentages in #6 and elected a	% EQ/Oppenheimer Global (6A*)
threshold, the same th	nreshold that you elected will also	% EQ/Templeton Global Equity (6D*)
apply to the Structured	d Investment Option if chosen as	% Invesco V.I. International Growth (7Z*)
part of your Special D Asset Allocation	CA dilocations.	% Lazard Retirement Emerging Markets Equity (8H*)
		% MFS® International Value (8A*)
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Cat. No. xxxxxx (5/11) Page 3 of 5

se this section to enter the participant's mailing address if it differs from e primary residential address. Also, for any additional details regarding eneficiary, replacement, or transfer information.	A and B must be completed.  A. Replacement Information: (Must Respond to 1 and 2.)
For Participants whose Mailing Address differs from their Primary Residential Address in #2.	A. Replacement information: (Must Respond to 1 and 2.)      Do you have any other existing life insurance or annuities?      Yes      No
Participant's Mailing Address:	
Mailing Address — P.O. Box Accepted	Will any existing life insurance or annuity be (or has it been) surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this
	transaction assuming the certificate applied for will be issued?  ☐ Yes ☐ No
City State Zip Code	4 × 4 × 5 × 6 × 6 × 6 × 6 × 6 × 6 × 6 × 6 × 6
	If <b>Yes</b> , fully complete the following information (if more than 3 companies are replaced, provide details in Special Instructions section):
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	3. Year Issued Type of Plan Company Contract Number.
	Company Address
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	B. Certificate State:
	The Certificate state is your state of primary residence (Your primary residential address from Section 2) unless you sign the enrollment form
	in a different state. If you are signing this enrollment form in a state other than your state of primary residence, check one box below:
	☐ I have a second residence in the state of sale.
	☐ I work or conduct business in the state of sale.
	If none of the above apply, the enrollment form must be signed in your state of Primary Residence, unless we approve another state.
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	And the second s

9. Other Required Information (Mandatory)

8. Special instructions

10. Broker Transfer Authorization	
Yes, by signing this enrollment form, I hereby designate my registered representative representative Report to act as my agent in giving investment option transfer instructions and I authorize AXA Equitable to act on such instructions. I understand that AXA Equitable stated identity of a person placing such instructions, and (ii) will have no liability for any clathat may arise in connection with such instructions. AXA Equitable will continue to act upor time as it receives my written notification of a change at its processing office. AXA Equitable telephone or electronic or overnight mail transfer procedures at any time without prior notic telephone and other electronic transfer services because of disruptive transfer activity.	by telephone or electronically, (i) may rely in good faith on the aim, loss, liability, or expense this authorization until such le may (i) change or terminate
11. Agreement	
• Amounts withdrawn from the certificate may be subject to a withdrawal charge. • No Registered Remake or modify any certificate on behalf of AXA Equitable, or to waive or alter any of AXA Equitable's Employer maintains a Plan that is intended to meet the requirements of Section 401(a) of the International Employer may authorize and instruct AXA Equitable to share my personal information with unaffiliate exchange of information to meet the requirements of the Code. • If my Employer maintains a Section instruct and require AXA Equitable to deduct a plan operating expense from my account value to pay recordkeeping services under the Plan; such amount will be remitted to a party not affiliated with AXA enrollment form I acknowledge that I am buying the certificate for its features and benefits other than feature of the certificate does not provide additional benefits. • All information and statements furnish and complete to the best of my knowledge and belief. • I understand that the annuity account value to variable investment options of the separate account or variable annuity benefit payments are not guaranteed as to dollar amount. • I acknowledge that I have received the most current supplement(s). • After reviewing my financial information and goals with my Registered Representificate will meet my financial goals.  Consent for Delivery of Initial Prospectus on CD-ROM:	s rights and regulations. • If my all Revenue Code (the "Code"), my did third parties to facilitate the a 401(a) plan, my Employer may for administrative and A Equitable. • By signing this a tax deferral, as the tax deferral and in this enrollment form are true fue attributable to allocations to may increase or decrease and a prospectus and any
Consent for Delivery of Initial Prospectus on CD-ROM:	
☐ <b>Yes.</b> By checking this box and signing the enrollment form below, I acknowledge that I summary on computer readable compact disk "CD", and I am able to access the CD information program summary indefinitely, I understand that I must print it. I also understand that I may in paper format at any time by calling Customer Service at 1-877-222-2144, and that all sumpdates and supplements will be provided to me in paper format, unless 1 enroll in AXA Education.	mation. In order to retain the y request a program summary obsequent program summary quitable's Electronic Delivery
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By checking this box, providing my email address, and signing the enrollment form below, I am a me further information about enrolling in AXA Equitable's electronic delivery so that I may receive all summary mailings electronically.  By signing this enrollment form the Participant acknowledges that he or she is buying the certificate for deferral, as the tax-deferral feature of the certificate does not provide additional benefits.	statements, confirms and program
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## EQUI-VEST® REGISTERED REPRESENTATIVE INFORMATION

Please print in black ink.

### All questions must be answered.

A.	Does the Proposed Par	ticipant have any existing life	e insurance or annuity contr	acts? 🗌 Yes 🗌 No	e de la companya del companya de la companya del companya de la co			
В.	Do you have reason to believe that any existing life insurance or annuity has been or will be surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this transaction, assuming the certificate applied for will be issued on the life of the participant? ☐ Yes ☐ No							
C.	Did you (i) verify the identity by reviewing the driver's license/passport of the Proposed Participant (ii) inquire about the source of the customer's assets and income and (iii) confirm that the Proposed Participant is not (nor is a family member of or associated with) a foreign military, government or political official?   Yes  No							
D.	· · · · · · · · · · · · · · · · · · ·							
	THE ARMED FORCES)	<b>.</b> ·			TIVE DUTY MEMBERS OF			
	(National Guard and	Reserve) while serving und erve component who are per	ier published orders for activ	e duty or full-time training.	pers of the reserve component The term does not include itary calls or orders specifying			
	Name and Signature of documents.	the Registered Represent	ative who answered the al	pove questions and verifie	ed the above			
			Signature		Date			
	Print Name		Oignature					
	Print Name  Broker/Dealer Name:  Broker/Dealer Email Address	98:	Signature					
	Broker/Dealer Name:	SS:	Signature					
	Broker/Dealer Name: Broker/Dealer Email Addres Print Registered Representative(s)	SS:	Signature		· · · · · · · · · · · · · · · · · · ·			
	Broker/Dealer Name: Broker/Dealer Email Addre Print Registered	ss: Last Four Digits of the SSN	Representative Code	Representative %	Client Account Number at Broker/Dealer			
	Print Registered Representative(s) Name(s) Reroker/Dealer Email Addres	Last Four Digits	Representative	•	1			
	Print Registered Representative(s) Name(s) Reroker/Dealer Email Addres	Last Four Digits	Representative	•	1			
	Print Registered Representative(s) Name(s) Reroker/Dealer Email Addres	Last Four Digits	Representative	•	1			
	Print Registered Representative(s) Name(s) Reroker/Dealer Email Addres	Last Four Digits	Representative	•	1			
	Print Registered Representative(s) Name(s) Reroker/Dealer Email Addres	Last Four Digits	Representative	•	1			

AXA EQUITABLE LIFE INSURANCE COMPANY New York, New York 10104



## AXA EQUITABLE LIFE INSURANCE COMPANY

## APPLICATION FOR EQUI-VEST STRATEGIES EDC (SERIES 901) GROUP FLEXIBLE PREMIUM COMBINATION FIXED AND VARIABLE DEFERRED ANNUITY CONTRACT

(Consisting of Parts A and B)

Part A Section I - Appli	ication and Agreemer	ıt for Partici	ipation in EQUI-VEST®	Strategies Contract		
1. Markets for EQUI-VEST Strategies Contract			on 457(b) Plan (EDC) – C			
2. Employer and Plan Information	Employer's Name:					
	Employer's Addres	'	nd Street (If non-U.S., Reg			)
		Attention				-
		City	State	Zip Code		
			tion Number:			energy of the second
			ext			
Broker of Record's Name and						
Code Number	CV #:  Indicate the date th		ernal Use Only) into effect.			
Plan Effective Date		onth	Day			-10
5. Administrative Charge		_	for each Certificate on the	last day of each Particip	ation Year is to be:	e de la companya de l
Payment	□ Paid by the Emp	loyer	ant's Account Value	narae must have a minim	um of 5 Particinant	s at the
	time the Unit is est	eci io pay ine ablished.	annual administrative ch	urge musi nave a minimi	an off Janucipani	

6. Designated Plan Administrator (If other than				Telephone Number
the Employer)	Address  Contact Person Name, Title	City Email Add	State	Zip Code Fax Number
7. Designated Plan Administrator Fee	If a Designated Plan Administr Participant's Account Value:  If yes, indicate amount for each Frequency:   Annually	□Yes □No  Participant: \$	Administrator's fee is to b	be deducted from each
8. Frequency of Plan Contributions	☐ Monthly ☐ Semi-Mo	nthly □Bi-Week	ly ] (3)	
9. Loan Information	Does the Plan permit Participar	nts to take loans? □Ye	s □No	
	Unless you or your designee pr will set the loan interest rate. W Rate +1.00% on a calendar mo	e will use the rate as pul	nterest rate on Participant lolished in the Wall Street Jo	oan requests, AXA Equitable ournal for the Prime Interest
	Does the plan have a limit on the	he number of loans that a	Participant can have under	r this Contract?
	☐ Yes ☐ No  If Yes, please provide the maxi	mum number of loans pe	ermitted under the Plan:	
10. Direct Rollovers and Transfers	Does the Plan permit:  Direct Rollover Contributions Plan-to-Plan Direct Transfer Contributions	□Yes ontributions □Yes		
11. Transaction Authorization	Please indicate whether or not Employer's approval:	Participants are authorize	ed to execute the following	transactions without the
	Investment Option Transfe Allocation Changes	ers	□Yes □No □Yes □No	<b>(</b>

٤.	ş		
		- 7	

12. Authorization Information	Please provide us with the individual(s) authorized to approve transaction(s) (i.e. loans, withdrawals etc.):			
	Name:	Signature:		
	Telephone Number:	Effective Date:		
13. Investment Options Methods	Please select the investment option method that will be available  (a) □ Make their own investment choices (Either Maximum Troption Choice)  (b) □ Have Maximum Transfer Flexibility  (c) □ Have Maximum Investment Option Choice			
14. Existing Plan Assets	Upon takeover, are existing Plan assets being transferred to an until such Plan assets can be allocated to the Certificates of the	unallocated account maintained by the Contract Participants? □Yes □No		
15. Sources of Contribution	Indicate which sources (Contribution types) can be made under	r this Plan. For Internal Use On		
	i. Employee Salary Deferrals – Pre-Tax: (Including direct transfers of amounts that were in other govern plans or other funding vehicles under this plan.)	Enmental Employer Section 457(b)		
	<ul> <li>ii. □ Employee Salary Deferrals – Designated Roth:</li> <li>(Including direct transfers of amounts that were in other govern plans or other funding vehicles under this plan.)</li> </ul>	H nmental Employer Section 457(b)		
	iii. □ Employer Matching Contributions: Employer Contributions matching Employee Contributions und (For periodic contributions and/or transfers from other funding			
	iv. □ Employer Non-Matching Discretionary Contributions:	<b>L L</b>		
	v.  Rollover Contributions – Pre-Tax (not from Roth IRA): Contributions of eligible rollover distributions directly or indirectly under the Code.	ectly from eligible retirement		
	vi. Designated Roth Rollover Contributions: Contributions of eligible Roth rollover distributions directly or retirement Plans under the Code.	indirectly from eligible		
	vii. □ EDC/457 Employer Contributions: (Including direct transfers of amounts that were in other governplans or other funding vehicles under this plan.)	F nmental Employer Section 457(b)		
	viii. ☐ Employee Non-Roth After-Tax Contributions: Amounts reported by the Employer as having Non-Roth post-t section 415 of the Code. (Includes loan repayment post-default	ax consequences under t – see Loan Information)		



#### Section II - Plan Location and Contribution Reminder Statement Information

Note: This Section must be completed if the Plan wants to receive Contribution Reminder Statements. If the Plan has more than one location that wants to receive a Contribution Reminder Statement, a fully completed Section II is required for each location designated. A copy of Section II may be reproduced locally.

	ch location designat	ea. A copy of Section II	may be reproduced local	iy.	
16. Plan Location	Does the location r	equest Contribution Stat	tements?	□Yes □N	0
Location Information	Is the Location Name the same as the Employer Name?  Is the Location Address the same as the Employer Address?  If either the Location Name or Address is different from the Employer Name or Address please complete the following:				
	Location Name: _				
	Attention of:			and the second s	
	Location Address:				
		Number and Street			
The second secon		City	State	Zip Code	
17. Contribution	Information for the	Contribution Statement	ts:		That bus
Statements	a. Contribution Due Date (choose the 1 <sup>st</sup> through 28 <sup>th</sup> of the month)  Month Day				
	b. Please indicate the frequency in which Contribution Statements are to be forwarded to you.  □ Monthly □ Semi-Monthly □ Bi-Weekly				
	Please note: The contribution frequency does not have to be the same for <b>all</b> locations.				
	c. Indicate how you wish to have the Contribution Statement produced:  □ Alphabetical order □ Certificate Number order				
	☐ Social Se	ecurity Number order			
	d. Do you want the contribution amount(s) to be printed on the Contribution Statements?  □ Yes □ No				
18. Location Contact Information	Location Contact I	Person:			
Mierination	Location Contact I	Person's Telephone Nun	nber	extension	
19. Mailing Information	Confirmation Noti	ces and Statements of A	ccount will be mailed to	the Participants.	

FOR PROCESSING USE ONLY:

PLAN ID:	_LOCATION	
2011 EV STRAT EDC		AXA Distributors, LLC

Section III - Trust Participation and Contract Holder Information The Employer and Plan Trustee hereby adopt and agree to participate in the Group Variable Deferred Trust Flexible Premium Annuity Trust of AXA Equitable Life Insurance Company ("Trust") its successors and Participation and assignees. Contract ☐ Yes ☐ No (Note: If yes, the "Trust" will be the Contract Holder.) Holder Information If the response above is no, specify the name of Contract Holder to be designated under the Contract: (check the appropriate box) (i) The Employer identified on page 1 (ii) ☐ Other (Please Specify) Name of the Trust: Address of the Trust: Street and Number Zip City State

Certain Contract Provisions

I. Investment Options - (Contract Section 2.01)

The Investment Options currently available under the Contract are listed in Attachment A. One of the following two methods for selecting your Investment Options is available under the Contract:

- 1) Maximum Investment Options: Participants may allocate Contributions or transfer funds to both Type A and Type B Investment Options. The Options currently available are listed in Attachment A (the Investment Options Chart). However, there will be restrictions on the amounts that can be transferred out of the Guaranteed Interest Option.
- 2) Maximum transfer flexibility: Participants may allocate Contributions to any available Investment Options under Type A. No restrictions will apply to amounts that can be transferred out of the Guaranteed Interest Option.
- II. Guaranteed Interest Option (Contract Section 2.02)
  Minimum Guaranteed Interest Rate: Not less than 1% and not more than 3%.
- III. Minimum Aggregate Contributions (on an annual basis) (Contract Section 3.01) \$0 \$5 Million
- IV. Allocations (Contract Section 3.02)

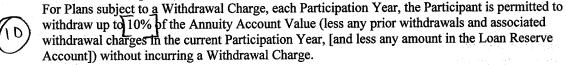
Restrictions on Allocations into the Guaranteed Interest Option: No more than 25% of any contribution may be allocated to the Guaranteed Interest Option. We may suspend these allocation restrictions upon notice to you. We will advise you of any such liberalization. We will also advise you at least 45 days in advance of the day we intend to reimpose any such restrictions, unless we have previously specified that date when we notified you of the liberalization.

V. Transfer Rules – (Contract Section 4.02)

The provisions of Section 4.02 of the Contract shall govern except that the maximum percentage of the amount in the Guaranteed Interest Option, which may be transferred, as described in Section 4.02 of the Contract, is the greater of 25% or the total amount transferred during the previous twelve months.

Restrictions on Transfers into the Guaranteed Interest Option: Transfers into the Guaranteed Interest Option will not be permitted if it would result in more than 25% of the Annuity Account Value to be in the Guaranteed Interest Option. We may suspend these transfer restrictions upon notice to you. We will advise you of any such liberalization. We will also advise you at least 45 days in advance of the day we intend to reimpose any such restrictions, unless we have previously specified that date when we notified you of the liberalization.

VI. Withdrawal Charges – (Contract Section 9.01)



The Withdrawal Charge will be assessed as a percentage of the amount withdrawn starting from the Participation Date of each Participant's Certificate as follows:

- 10 Years: 6%, 6%, 6%, 6%, 6%, 5%, 4%, 3%, 2%, 1%, or
- 1 7 Years: 6%, 6%, 5%, 4%, 3%, 2%, 1%, or
- 5 Years: 5%, 5%, 5%, 5%, 5%, or
- · None, or



The Withdrawal Charge will be assessed as a percentage of each Contribution withdrawn attributable to Contributions made during the current and five prior Participation Years based on the following percentages:

- 5%, 5%, 5%, 5%, 5%, 5%, or
- 5%, 5%, 5%, 5%, 5% until the beginning of the 13<sup>th</sup> Participation Year when the charge becomes zero, or

The Withdrawal Charge will be assessed as a percentage of the amount withdrawn from each Participant's Certificate starting from the Contract Date of the Group Contract as follows:

• 5 Years: 5%, 5%, 5%, 5%, 5%

• 3 Years: 6%, 6%, 6%



No withdrawal charge will apply when: (Standard Waivers)



- 1) after 5 Participation Years, the Participant reaches age 55 and severs from employment; or
- 2) Ithe later of the completion of at least five Participation Years and the Participant's attainment of 59 1/2; or
- 3) a request is made for a refund of a Contribution in excess of the amount that may be contributed under Section 457(b) of the Code within one month of the date on which the Contribution is made; or
- 4) the Participant's attainment of age 55, the completion of at least five Participation Years and the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase an eligible Annuity Certain; or
- 5) the Participant's completion of at least three Participation Years and the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase a Period Certain Annuity, where the certain period of such annuity is least ten years; or
- 6) the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase a life annuity distribution, pursuant to the terms of this Contract; or
- 7) the Participant dies and a death benefit is payable to the Beneficiary; or
- 8) the withdrawal is made to satisfy minimum distribution requirements under Code Section 401(a)(9); or
- 9) the Participant elects a withdrawal that qualifies as an unforeseeable emergency withdrawal under the Code; or
- 10) the Participant has qualified to receive Social Security disability benefits as certified by the Social Security Administration; or
- 11) AXA Equitable receives proof satisfactory to us that the Participant's life expectancy is six months or less, and such proof must include, but is not limited to, certification by a licensed physician; or
- 12) the Participant has been confined to a nursing home for more than 90 days (or such other period, as required in your state) as verified by a licensed physician. A nursing home for this purpose means one that is (a) approved by Medicare as a provider of skilled nursing care service, or (b) licensed as a skilled nursing home by the state or territory in which it is located (it must be within the United States, Puerto Rico, U.S. Virgin Islands, or Guam) and meets all of the following:
  - its main function is to provide skilled, intermediate, or custodial nursing care;
  - it provides continuous room and board to three or more persons;
  - it is supervised by a registered nurse or licensed practical nurse;
  - it keeps daily medical records of each patient;
  - it controls and records all medications dispensed; and
  - its primary service is other than to provide housing for residents.

The withdrawal charge will apply if the condition as described in items 10 through 12 existed at the time the [Participant's Certificate is issued] [Contract is issued] or if the condition began within the 12 month period following the issuance of the [Participant's Certificate] [Contract].

(Benefit Sensitive Waiver)

- 13) the Participant severs from employment.
- VII. Third Party Transfer (Contract Section 9.02)

  Currently \$25. AXA Equitable reserves the right to charge a maximum of \$65 for each occurrence of a withdrawal for any reason, to cover administrative processing costs.
- VIII. Annual Administrative Charge (Contract Section 9.04)
  If applicable, the annual administrative charge will be deducted from each certificate on the last day of each Participation Year as follows:
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$30; waived at an annuity account value of \$15,000 or more, or
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$30; waived at an annuity account value of \$25,000 or more, or
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$15; waived at an annuity account value of \$15,000, or more, or
  - The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$15; waived at an annuity account value of \$25,000, or more, or
  - None
- IX. Variable Separate Account Charge (Contract Section 9.06) 0.00% 2.00%
- X. | Participant Accounts (Contract Section 8.01) and Termination of the Contract (Contract Section 11.08)

Participant consent is required for the Employer to make withdrawals from or terminate a Participant's account under the Contract. It is the Employer's responsibility to obtain Participant consent.

When you sign this Application, you are agreeing to the elections that you have made in this Application and acknowledge that you understand the terms and conditions set forth in this Application.

By signature(s) on the next page of duly authorized person(s), the Employer and or the Trustee(s) if applicable, hereby:

- 1. acknowledge having received and read the most current EQUI-VEST Strategies Prospectus and the Prospectus Supplement(s) for participation under the Contract.
- 2. acknowledge, understand and agree to: the elections made in this Application, the various levels of fees, charges, and funding arrangements under the Contract.
- 3. apply for participation in the Contract as funding vehicle for the Plan;
- 4. agree to be bound by the terms and conditions of the Contract;
- 5. acknowledge and understand that no Registered Representative has authority to make or modify any contract or agreement on AXA Equitable's behalf, or to waive or alter any of AXA Equitable's rights or requirements; and
- 6. acknowledge and agree that the provisions contained in this Application and the Contract issued upon acceptance of this Application by AXA Equitable supersede all prior agreements that may have previously been entered into between the Employer and AXA Equitable.
- 7. acknowledge, understand and agree that all forfeiture funds, if any, will be re-allocated among remaining Participants to offset future Employer contributions.
- 8. acknowledge, understand and agree that assets transferred from a prior funding vehicle are received by AXA Equitable, such assets will be deposited as one lump sum to an Unallocated Account in the Guaranteed Interest Option. Assets shall remain in this account until all forms are completed and until all information needed to complete the transfer is received by AXA Equitable. With respect to each Participant, AXA Equitable will allocate amounts to each Participant's Certificate only after you provide instructions that are acceptable and necessary in order to complete the allocation process. Once all the necessary information is received and has been determined to be acceptable by AXA Equitable, AXA Equitable will allocate such amounts to each Participant's Certificate. You are solely responsible for effectuating the asset transfer in accordance with all applicable laws and regulations.
- 9. understand that by identifying the Designated Plan Administrator (page 2) and signing on the next page, the Employer and or the Trustee(s) are authorizing AXA Equitable to provide information regarding the Plan and Plan Participants to them.
- 10. understand that the Annuity Account Value attributable to allocations to the Variable Investment Options may increase or decrease and are not guaranteed as to dollar amount.
- 11. understand that the Employer's legal counsel and/or advisor should determine that there are no local or state laws, rules and/or regulations which prohibit the investment of Plan assets in the Contract and in the Investment Options indicated on **Attachment A** of this application.

	FOR CONTRACT HOLDER(S):(If the Contract Holder is the Employer or the T Section III, complete (a) below; If the Contract Holder is other than the Employer (a) and (b) below.)	or the Trust, complete
	(a)	and the state of t
	(a)	State
	By	
	Signature and Title of Authorized Individual/Employer	Date
	(b)	
	(b)	State
	By	Date
		·
Accepted for AXA Equitable		
	ACCEPTED FOR AXA EQUITABLE:	$u_{m,n}$
To be completed by the AXA	Print Name of Authorized Signatory  By Signature of Authorized Signatory	
Equitable	Print Name of Authorized Signatory Signature of Authorized Signatory	
Processing Office)	Effective Date:	
		14 <u>2</u>
	Group Annuity Contract No	
	A copy of the Contract, the Application, including Parts A and B (inc Charges), and Investment Options Chart, will be signed by AXA Equ to the Contract Holder after review. All returned documents will gov the Contract. Initial contributions will be accepted by AXA Equitable	itable and returned ern the operation of only after
	installation documents have been approved by AXA Equitable's Proc	essing Office.

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Attachment A - Investment Options Chart (Series 901)

Attachment A - Investi	nent Options Chart (Series 90)	1)
Type B	Type A	0
AXA Conservative Allocation	Guaranteed Interest Option	Fidelity® VIP Contrafund®
AXA Conservative-Plus Allocation	All Asset Allocation	Fidelity® VIP Equity Income
EQ/Core Bond Index	American Century VP Mid Cap Value	
A STATE OF THE STA	Fund	Fidelity VIP Mid Cap
EQ/Franklin Core Balanced	AXA Aggressive Allocation	Goldman Sachs VIT Mid Cap Value
EQ/Global Bond PLUS	AXA Moderate Allocation	Invesco V.I. Dividend Growth
EQ/Intermediate Government Bond	AXA Moderate-Plus Allocation	* *** OLI ID ID I
Index		Invesco V.I. Global Real Estate
EQ/Money Market	AXA Tactical Manager 400	Invesco V.I. International Growth
EQ/PIMCO Ultra Short Bond	AXA Tactical Manager 500	Invesco V.I. Mid Cap Core Equity
EQ/Quality Bond PLUS	AXA Tactical Manager 2000	Invesco V.I. Small Cap Equity
Invesco V.I. High Yield	AXA Tactical Manager International	Ivy Funds VIP Mid Con Crowth
Ivy Funds VIP High Income	EQ/AllianceBernstein Small Cap Growth	Ivy Funds VIP Mid Cap Growth
Multimanager Core Bond	EQ/AXA Franklin Small Cap Value Core	Ivy Funds VIP Small Cap Growth  Lazard Retirement Emerging Markets Equity
Multimanager Multi-Sector Bond	EQ/BlackRock Basic Value Equity	Lazard Retirement Emerging Markets Equity
PIMCO VIT CommodityRealReturn®	EQ/Boston Advisors Equity Income	MFS® International Value
Strategy	TO/G 1 4 G : 11 D	MFS International Value MFS® Investors Growth Stock
	EQ/Calvert Socially Responsible	MFS* investors Growth Stock  MFS® Investors Trust
	EQ/Common Stock Index	MFS investors frust MFS® Technology
	EQ/Davis New York Venture	MFS Technology MFS® Utilities
Paris de la companya	EQ/Equity 500 Index	
	EQ/Equity Growth PLUS	Multimanager Aggressive Equity  Multimanager International Equity
	EQ/Franklin Templeton Allocation	Multimanager International Equity  Multimanager Large Cap Value
	EQ/GAMCO Small Company Value	Multimanager Mid Cap Growth
	EQ/Global Multi-Sector Equity	Multimanager Mid Cap Value
	EQ/International Core PLUS	Multimanager Small Cap Growth
	EQ/International Equity Index EQ/International Value PLUS	Multimanager Small Cap Value
		Multimanager Technology
	EQ/JPMorgan Value Opportunities	Oppenheimer Main Street Fund®/VA
	EQ/Large Cap Core PLUS EQ/Large Cap Growth Index	Structured Investment Option
	EQ/Large Cap Growth PLUS	Target 2015 Allocation
	EQ/Large Cap Value Index	Target 2025 Allocation
	EQ/Large Cap Value PLUS	Target 2035 Allocation
	EQ/Lord Abbett Large Cap Core	Target 2045 Allocation
	EQ/MFS International Growth	Templeton Global Bond Securities
	EQ/Mid Cap Index	Van Eck VIP Global Hard Assets
	EQ/Mid Cap Hidex EQ/Mid Cap Value PLUS	Van Bon va Groom and Groom
	EQ/Montag & Caldwell Growth	
	EQ/Morgan Stanley Mid Cap Growth	The second secon
	EQ/Mutual Large Cap Equity	
	EQ/Oppenheimer Global	
	EQ/Small Company Index	
	EQ/T. Rowe Price Growth Stock	
	EQ/Templeton Global Equity	
	EQ/Van Kampen Comstock	
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		A CONTRACTOR OF THE CONTRACTOR

**AXA Equitable Life Insurance Company** 

**AXA Distributors, LLC** 

EQUI-VEST® Strategies<sup>SM</sup> (Series 901) Combination Fixed and Variable Deferred Annuity 457(b) EDC Enrollment Form

Application No		
1. Employer i	nformation	
Employer/and (or)	School Name/Unit Name	
Unit Number		
2. Participant	information (check a	opropriate boxes)
Address below, p	ddress is different from the elease provide your Mailin- within the last 12 months in the Special Instruction	g Address in Section 8. If , please indicate your
☐ Mr. ☐ Mrs. ☐ Male ☐ Female	] Miss □ Ms. □ Other .	
	Social Security Number (	 Required)
First Name	Middle Initial	Last Name
First Name		Home Work
Birth Date (M/D/Y)	Age at Nearest Birthday	Daytime Phone Number
U.S.A. Primary Resident	ial Address – No P.O. Box Permitte	
City	State	Zip Code
Email Address (optional)		
Linaii Addiess (optional)		
Valid Driver's License No	<u>. 111</u>	State Exp. Date
II C Chinana El V	as 🗆 No /If No complete b	alou and attack some of
	es   No (If No, complete banent Resident card)	elow and allach copy of
Country	Passport #/Resident Car	d # U.S. Visa Type
3. Beneficiary	(ies) information	
Primary	(les) Information	
1.		
First Name	Last Name	
Relationship to Partic  Spouse: Male Child: Male  Other	e	

EV STRAT EDC 2011

**Mailing Instructions:** 

Express Mail: (with money):

JPMorganChase

4 Chase Metrotech Center, 7<sup>th</sup> Floor NY Remit One Image Lockbox # 13463

Brooklyn, NY 11245-0001

Regular Mail: (with money): EQUI-VEST Unit Annuity Lockbox Lockbox P.O. Box 13463 Newark, NJ 07188-0463



Express Mail: (without money): EOUI-VEST New Business 100 Madison St., Suite 1000 Syracuse, NY 13202

Regular Mail: (without money): EQUI-VEST New Business P.O. Box 4704, Syracuse, NY 13221-4704 For Assistance, please call 800-628-6673

3. Beneficiary(ies) information (continued)	
Primary	
2	%
First Name Last Name	/0
Relationship to Participant:  Spouse: Male Female C Child: Male Female C Other	
T.I.N.: S.S.N.	_
Contingent	
1. First Name Last Name	%
Relationship to Participant:  Spouse: Male Female C Child: Male Female C Other	***************************************
T.I.N.: S.S.N.	
4. Optional feature Enhanced Death Benefit	
If you would like to elect the Enhanced Death Benefit, please ch following box:  Yes, I would like to elect the Enhanced Death Benefit.	
5. Contribution amount	
If a payment will be forwarded at a later date, you must complete #5. applicable, #5B. If a payment will be provided when the application i complete #5C only.	
A. Expected first-year contribution: \$	
Indicate the amount expected to be contributed	
in the first year of this certificate.  (Exclude direct transfer or rollover amounts)	
B. Expected direct transfer or rollover amounts: \$	
(i) If you intend to allocate all or a portion of this	·
amount to Special Dollar Cost Averaging, also complete #	7
<ul><li>(ii) If this is a rollover, is it from a 401(k) plan or other eligible retirement plan?</li><li>☐ Yes ☐ No</li></ul>	
C. Amount provided with this enrollment form:	
(i) Total amount for investment options	
listed in #6. \$	
(ii) Provide a breakdown of employee	
and employer contributions. \$\$	mployer
- <b>(2)</b>	÷
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ADL EDC Enrollment Form Cat. No. IXXXXX (5/11) Page 1 of 5

## Selection of investment options and allocation percentages Must check either Box A or Box B, but not both. A. Maximum Transfer Flexibility. By checking this box, you may invest in the investment options listed in this section which are not boxed off. Transfers out of the Guaranteed Interest Option will not be limited. B. Maximum Fund Choice. By checking this box, you may invest in any of the investment options listed in this section. Transfers out of the Guaranteed Interest Option will be limited (see prospectus for details). Current Allocation (Applies to Boxes A and B): Select the allocation for the contributions indicated in #5A or any amounts that you may invest in these investment options in the future. You can change this allocation for future contributions at any time. The percentages entered below must be in whole numbers and total 100%. Contribution Allocation Structured Investment Option Segment S&P 500 1year -10% Buffer (V1\*) Although not required, you have the ability to choose a \_% S&P 500 Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing ☐ I want to choose a Performance Cap Threshold. Asset Allocation **AXA Allocation** \_% AXA Aggressive Allocation (18\*) % AXA Moderate Allocation (T4\*) AXA Moderate-Plus Allocation (17\*) % **Target Allocation** \_% Target 2015 Allocation (6G\*) % Target 2025 Allocation (6H\*) % Target 2035 Allocation (6I\*) \_% Target 2045 Allocation (6J\*) Other Asset Allocation \_% All Asset Allocation (7H\*) \_% EQ/Franklin Templeton Allocation (6P\*) Large Cap Stocks % AXA Tactical Manager 500 (7M\*) % EQ/BlackRock Basic Value Equity (81\*) \_% EQ/Boston Advisors Equity Income (33\*) % EQ/Calvert Socially Responsible (92\*) .% EQ/Common Stock Index (T1\*) .% EQ/Davis New York Venture (6Q\*) Section 200 (\*\*) Sec % EQ/Equity Growth PLUS (94\*) % EQ/JPMorgan Value Opportunities (72\*) % EQ/Large Cap Core PLUS (85\*) % EQ/Large Cap Growth Index (82\*) \_% EQ/Large Cap Growth PLUS (77\*) % EQ/Large Cap Value Index (49\*) % EQ/Large Cap Value PLUS (89\*) .% EQ/Lord Abbett Large Cap Core (05\*) % EQ/Montag & Caldwell Growth (34\*) .% EQ/Mutual Large Cap Equity (6F\*) % EQ/T. Rowe Price Growth Stock (32\*) % EQ/Van Kampen Comstock (07\*) % Fidelity® VIP Contrafund® (7R\*) % Fidelity® VIP Equity Income (7S\*)

% MFS® Investors Growth Stock (8I\*) % MFS® Investors Trust (7P\*)

% Multimanager Aggressive Equity (T2\*) Multimanager Large Cap Value (58\*)

Oppenheimer Main Street Fund®/VA (7Q\*)

Small/Mid Cap	Stocks
%	American Century VP Mid Cap Value (7V*)
%	AXA Tactical Manager 400 (7L*)
%	AXA Tactical Manager 2000 (7K*)
%	EQ/AllianceBernstein Small Cap Growth (TP*)
%	EQ/AXA Franklin Small Cap Value Core (6E*)
%	EQ/GAMCO Small Company Value (37*)
%	EQ/Mid Cap Index (55*)
%	EQ/Mid Cap Value PLUS (79*)
%	EQ/Morgan Stanley Mid Cap Growth (08*)
%	EQ/Small Company Index (97*)
%	Fidelity® VIP Mid Cap (7U*)
%	Goldman Sachs VIT Mid Cap Value (7W*) Invesco V.I. Mid Cap Core Equity (7T*)
% %	Invesco V.I. Small Cap Equity (71*)
% %	Ivy Funds VIP Mid Cap Growth (8M*)
%	Ivy Funds VIP Small Cap Growth (7Y*)
%	Multimanager Mid Cap Growth (59*)
%	Multimanager Mid Cap Value (61*)
%	Multimanager Small Cap Growth (36*)
%	Multimanager Small Cap Value (91*)
International Ş	tocks/Global
%	AXA Tactical Manager International (7N*)
%	EQ/Global Multi-Sector Equity (78*)
%	EQ/International Core PLUS (88*)
%	EQ/International Equity Index (TN*)
%	EQ/International Value PLUS (73*)
%	EQ/MFS International Growth (26*)
%	EQ/Oppenheimer Global (6A*)
%	EQ/Templeton Global Equity (6D*)
%	Invesco V.I. International Growth (7Z*)
%	Lazard Retirement Emerging Markets Equity (8H*)
%	MFS® International Value (8A*)
%	Multimanager International Equity (65*)
AXA Allocatio	n (Not available under Max Flex option)
	in the second of the second se
%	AXA Conservative Allocation (15*)
% %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)
% % Bonds (Not a	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*) vailable under Max Flex option)
% % Bonds (Not at	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*) vailable under Max Flex option) EQ/Core Bond Index (96*)
% % Bonds (Not a) % %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*) vallable under Max Flex option) EQ/Core Bond Index (96*) EQ/Global Bond PLUS (47*)
% % Bonds (Not a) 	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)
% Bonds (Not as % % % % % % % % % % %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)
% Bonds (Not as % % % % % % % % % % % %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*) vallable under Max Flex option) EQ/Core Bond Index (96*) EQ/Global Bond PLUS (47*) EQ/Intermediate Government Bond Index (TI*) EQ/PIMCO Ultra Short Bond (28*) EQ/Quality Bond PLUS (TQ*)
% Bonds (Not as % % % % % % % % % % % % % % % % %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)
% Bonds (Not as % % % % % % % % % % % % % % % % %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)
% Bonds (Not as % % % % % % % % % % % % % % % % % % %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)
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## Sector/Special	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)
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Sector/Specia	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)
## Sector/Special ***    ***	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)
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Sector/Specia	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)
## Sector/Specia  **Sector/Specia **Sector/Spe	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)
## Sector/Special ## ## ## ## ## ## ## ## ## ## ## ## ##	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)  Ity  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)
## Sector/Special ## ## ## ## ## ## ## ## ## ## ## ## ##	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)
## Sector/Specia	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)
## Sector/Special    Sector/Special	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)
## Sector/Specia	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*)  /ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ents (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Technology (8J*)  MIS® Technology (67*)  Van Eck VIP Global Hard Assets (8N*)  ixed
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Sector/Specia % % Sector/Specia % % % Sector/Specia % % % % Sector/Specia % % % % % % % % % % % % % % % % % % %	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*) vallable under Max Flex option) EQ/Core Bond Index (96*) EQ/Global Bond PLUS (47*) EQ/Intermediate Government Bond Index (TI*) EQ/PIMCO Ultra Short Bond (28*) EQ/Quality Bond PLUS (TQ*) Invesco V.I. High Yield (8L*) Ivy Funds VIP High Income (8G*) Multimanager Core Bond (69*) Multimanager Multi-Sector Bond (TH*) Templeton Global Bond Securities (8F*) ents (Not available under Max Flex option) EQ/Fonklin Core Balanced (6C*) PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*) Invesco V.I. Global Real Estate (8C*) Ivy Funds VIP Energy (8D*) MFS® Technology (8J*) MFS® Technology (8J*) MFS® Technology (67*) Van Eck VIP Global Hard Assets (8N*)  Ixed Guaranteed Interest Option (A1*)  Total of all investment options chosen for
	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*) vailable under Max Flex option) EQ/Core Bond Index (96*) EQ/Global Bond PLUS (47*) EQ/Intermediate Government Bond Index (TI*) EQ/PIMCO Ultra Short Bond (28*) EQ/Quality Bond PLUS (TQ*) Invesco V.I. High Yield (8L*) Ivy Funds VIP High Income (8G*) Multimanager Core Bond (69*) Multimanager Multi-Sector Bond (TH*) Templeton Global Bond Securities (8F*) ents (Not available under Max Flex option) EQ/Money Market (T3*) Ity (Not available under Max Flex option) EQ/Franklin Core Balanced (6C*) PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*) Invesco V.I. Global Real Estate (8C*) Ivy Funds VIP Energy (8D*) MFS® Technology (8J*) MFS® Technology (8J*) MFS® Technology (67*) Van Eck VIP Global Hard Assets (8N*)  ixed Guaranteed Interest Option (A1*)  Total of all investment options chosen for Contribution Allocations must equal 100%
## Sector/Specia  ## Sector/Sp	AXA Conservative Allocation (15*) AXA Conservative-Plus Allocation (16*) vallable under Max Flex option) EQ/Core Bond Index (96*) EQ/Global Bond PLUS (47*) EQ/Intermediate Government Bond Index (TI*) EQ/PIMCO Ultra Short Bond (28*) EQ/Quality Bond PLUS (TQ*) Invesco V.I. High Yield (8L*) Ivy Funds VIP High Income (8G*) Multimanager Core Bond (69*) Multimanager Multi-Sector Bond (TH*) Templeton Global Bond Securities (8F*) ents (Not available under Max Flex option) EQ/Fonklin Core Balanced (6C*) PIMCO VIT CommodityRealReturn® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*) Invesco V.I. Global Real Estate (8C*) Ivy Funds VIP Energy (8D*) MFS® Technology (8J*) MFS® Technology (8J*) MFS® Technology (67*) Van Eck VIP Global Hard Assets (8N*)  Ixed Guaranteed Interest Option (A1*)  Total of all investment options chosen for

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%

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	7. Special Dollar Cost Averaging (Special DCA)	
	Only available for direct transfer and rollover contributions. Choose	
	one time period. 100% of the contribution indicated in #5B will be allocated to Special DCA unless you specify a dollar amount for the time	Small/Mid
ς-	period selected.	
l	☐ 3-months: ☐ 100% Allocation or ☐ \$	
	☐ 6-months: ☐ 100% Allocation or ☐ \$	
	☐ 12-months: ☐ 100% Allocation or ☐ \$	
	Use the Special DCA allocation column below for amounts to be transferred under the Special DCA program. You cannot select more than 10 investment options.	
	If only allocating a portion of the direct transfer or rollover to Special	
	DCA, you <u>must</u> complete the contribution allocations listed in #6.  Note: Your choice of Maximum Transfer Flexibility or Maximum Fund	
	Choice as indicated in #6 will also apply to the investment options listed in this section.	
-	Special DCA Allocation	
1	Structured Investment Option Segment	
	% S&P 500 1 year -10% Buffer (V1*) Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance Cap Threshold, please check the box below and complete	Internatio
	the Performance Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be submitted along with this application to our Processing Office.	
	☐ I want to choose a Performance Cap Threshold.	
	Note: if you elect the Structured Investment Option as	
	part of your allocation percentages in #6 and elected a threshold, the same threshold that you elected will also	
	apply to the Structured Investment Option if chosen as part of your Special DCA allocations.	ļ
	Asset Allocation	
	AXA Allocation  AXA Aggressive Allocation (18*)	AXA Alic
١	% AXA Moderate Allocation (T4*)	
	% AXA Moderate-Plus Allocation (17*) Target Allocation	Bonds (I
	% Target 2015 Allocation (6G*)	
	% Target 2025 Allocation (6H*)	
	% Target 2035 Allocation (61*)% Target 2045 Allocation (6J*)	
	Other Asset Allocation	
	% All Asset Allocation (7H*)% EQ/Franklin Templeton Allocation (6P*)	
	Large Cap Stocks	
	% AXA Tactical Manager 500 (7M*)% EQ/BlackRock Basic Value Equity (81*)	
١	% EQ/Boston Advisors Equity Income (33*)	Cash Eq
	% EQ/Calvert Socially Responsible (92*)% EQ/Common Stock Index (T1*)	Sector/S
	% EQ/Davis New York Venture (6Q*)	<u> </u>
	% EQ/Equity 500 Index (TE*)	Sector/S
	% EQ/Equity Growth PLUS (94*)% EQ/JPMorgan Value Opportunities (72*)	
	% EQ/Large Cap Core PLUS (85*)	
-	% EQ/Large Cap Growth Index (82*)% EQ/Large Cap Growth PLUS (77*)	
	% EQ/Large Cap Value Index (49*)	
	% EQ/Large Cap Value PLUS (89*)% EQ/Lord Abbett Large Cap Core (05*)	
1	% EQ/Lord Abbelt Large Cap Core (05)  ———————————————————————————————————	
	% EQ/Mutual Large Cap Equity (6F*)	
1	% EQ/T. Rowe Price Growth Stock (32*) % EQ/Van Kampen Comstock (07*)	* The n
	% Fidelity® VIP Contrafund® (7R*)	
	% Fidelity® VIP Equity Income (7S*)	
١	% MFS® Investors Growth Stock (8I*)	

	F
%	MFS® Investors Trust (7P*)
	Multimanager Aggressive Equity (T2*)
% %	Multimanager Large Cap Value (58*) Oppenheimer Main Street Fund®/VA (7Q*)
Small/Mid Cap	
%	American Century VP Mid Cap Value (7V*)
%	AXA Tactical Manager 400 (7L*)
%	AXA Tactical Manager 2000 (7K*)
%	EQ/AllianceBernstein Small Cap Growth (TP*)
%	EQ/AXA Franklin Small Cap Value Core (6E*)
%	EQ/GAMCO Small Company Value (37*)
%	EQ/Mid Cap Index (55*)
%	EQ/Mid Cap Value PLUS (79*)
% %	EQ/Morgan Stanley Mid Cap Growth (08*)
%	EQ/Small Company Index (97*) Fidelity® VIP Mid Cap (7U*)
%	Goldman Sachs VIT Mid Cap Value (7W*)
%	Invesco V.I. Mid Cap Core Equity (7T*)
%	Invesco V.I. Small Cap Equity (7X*)
%	Ivy Funds VIP Mid Cap Growth (8M*)
%	Ivy Funds VIP Small Cap Growth (7Y*)
%	Multimanager Mid Cap Growth (59*)
%	Multimanager Mid Cap Value (61*)
%	Multimanager Small Cap Growth (36*)
%_	Multimanager Small Cap Value (91*)
International St	locks/Global
% %	AXA Tactical Manager International (7N*)
%	EQ/Global Multi-Sector Equity (78*) EQ/International Core PLUS (88*)
%	EQ/International Equity Index (TN*)
%	EQ/International Value PLUS (73*)
%	EQ/MFS International Growth (26*)
%	EQ/Oppenheimer Global (6A*)
%	EQ/Templeton Global Equity (6D*)
%	Invesco V.I. International Growth (7Z*)
%	Lazard Retirement Emerging Markets Equity (8H*)
%	MFS® International Value (8A*)
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## A and B must be completed. Use this section to enter the participant's mailing address if it differs from the primary residential address. Also, for any additional details regarding A. Replacement Information: (Must Respond to 1 and 2.) beneficiary, replacement, or transfer information. 1. Do you have any other existing life insurance or annuities? For Participants whose Mailing Address differs from their Primary ☐ Yes ☐ No Residential Address in #2. Participant's Mailing Address: 2. Will any existing life insurance or annuity be (or has it been) surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this Mailing Address - P.O. Box Accepted transaction assuming the certificate applied for will be issued? ☐ Yes ☐ No If Yes, fully complete the following information (if more than 3 City State Zip Code companies are replaced, provide details in Special Instructions section): Contract Number Type of Plan Company Year Issued Company Address Type of Plan Contract Number Year Issued Company Company Address Contract Number Year Issued Type of Plan Company Company Address **B. Certificate State:** The Certificate state is your state of primary residence (Your primary residential address from Section 3) unless you sign the enrollment form in a different state. If you are signing this enrollment form in a state other than your state of primary residence, check one box below: ☐ I have a second residence in the state of sale. ☐ I work or conduct business in the state of sale. If none of the above apply, the enrollment form must be signed in your state of Primary Residence, unless we approve another state. \* caeach - undc

9. Other Required Information (Mandatory)

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8. Special instructions

10. Broker Transfer Authorization			
☐ Yes, by signing this enrollment form, I hereby de Representative Report to act as my agent in giving and I authorize AXA Equitable to act on such instrustated identity of a person placing such instructions that may arise in connection with such instructions. time as it receives my written notification of a change telephone or electronic or overnight mail transfer presented the phone and other electronic transfer services because.	investment option transfections. I understand that A, and (ii) will have no liable AXA Equitable will continge at its processing office recedures at any time with	er instructions b AXA Equitable ility for any clau ue to act upon . AXA Equitable nout prior notice	by telephone or electronically, (i) may rely in good faith on the im, loss, liability, or expense this authorization until such e may (i) change or terminate
11. Agreement			
• Amounts withdrawn from the certificate may be subject make or modify any certificate on behalf of AXA Equitable Employer maintains a Plan that is intended to meet the remaining Employer may authorize and instruct AXA Equitable to shexchange of information to meet the requirements of the instruct and require AXA Equitable to deduct a plan operarecordkeeping services under the Plan; such amount will enrollment form I acknowledge that I am buying the certificature of the certificate does not provide additional beneat the variable investment options of the separate accordare not guaranteed as to dollar amount. • I acknowled supplement(s). • After reviewing my financial informaticertificate will meet my financial goals.	to a withdrawal charge. • No e, or to waive or alter any of equirements of Section 457() hare my personal information Code. • If my Employer main ating expense from my accobe remitted to a party not atficate for its features and begins. • All information and state understand that the annuity unt or variable annuity beridge that I have received the	AXA Equitable's b) of the Internal with unaffillated ntains a Section unt value to pay filliated with AXA nefits other than terments furnished the account value of the payments are most current.	rights and regulations. • If my Revenue Code (the "Code"), my I third parties to facilitate the 457(b) plan, my Employer may for administrative and Equitable. • By signing this tax deferral, as the tax deferral ed in this enrollment form are true are attributable to allocations to may increase or decrease and prospectus and any
Consent for Delivery of Initial Prospectus on CD	D-ROM:		and the state of t
☐ <b>Yes.</b> By checking this box and signing the enro on computer readable compact disk "CD", and I an indefinitely, I understand that I must print it. I also up by calling Customer Service at 1-877-222-2144 an provided to me in paper format, unless I enroll in A	n able to access the CD inderstand that I may requent that all subsequent pros	nformation. In uest a prospec spectus update	order to retain the prospectus tus in paper format at any time as and supplements will be
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By checking this box, providing my email address, arme further information about enrolling in AXA Equitable's prospectus mailings electronically.			
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Proposed Participant's Signature	Today's Date (mm/dd/yy)	City	State
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# EQUI-VEST® REGISTERED REPRESENTATIVE INFORMATION Please print in black ink.

## All questions must be answered.

A.	Does the Proposed Participant have a							
В.	Do you have reason to believe that any existing life insurance or annuity has been or will be surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this transaction, assuming the certificate applied for will be issued on the life of the participant?   Yes  No							
C.	Did you (i) verify the identity by review customer's assets and income and (iii) foreign military, government or political	confirm that the Proposed Pa	rt of the Proposed Parti rticipant is not (nor is a	cipant (ii) inquire family member o	about the source of the tast f or associated with) a			
D.	Is the Proposed Participant currently a	in Active Duty* Member of the	Armed Forces? ☐ Yes	☐ No				
	(If Yes, you must also submit a comple THE ARMED FORCES).	eted and signed LIFE INSURA	NCE/ANNUITY DISCLO	SURE TO ACTIV	E DUTY MEMBERS OF			
	* "Active Duty" means full-time duty (National Guard and Reserve) while members of the reserve componen periods of less than 31 calendar da	e serving under published orde It who are performing active du ays.	ers for active duty or ful ty or active duty for tra	I-time training. Th ining under milita	e term does not include ry calls or orders specifying			
	Name and Signature of the Registere documents.	d Representative who answe	ered the above question	ons and verified	the above			
	Print Name	Signatur	e		Date			
	Print Name  ker/Dealer Name:  ker/Dealer Email Address:				Date			
	ker/Dealer Name:			Representative %	Client Account Number at Broker/Dealer			
	ker/Dealer Name: ker/Dealer Email Address: Print Registered Representative(s) Name(s)				Client Account Number at			
	ker/Dealer Name:  ker/Dealer Email Address:  Print  Registered Representative(s) Name(s) (Service Representative First)				Client Account Number at			
	ker/Dealer Name: ker/Dealer Email Address: Print Registered Representative(s) Name(s)				Client Account Number at			
	ker/Dealer Name: ker/Dealer Email Address: Print Registered Representative(s) Name(s) (Service Representative First)				Client Account Number at			
	ker/Dealer Name:  ker/Dealer Email Address:  Print  Registered Representative(s) Name(s) (Service Representative First)				Client Account Number at			
	ker/Dealer Name: ker/Dealer Email Address:  Print  Registered Representative(s) Name(s)  (Service Representative First)				Client Account Number at			

AXA EQUITABLE LIFE INSURANCE COMPANY New York, New York 10104

## AXA EQUITABLE LIFE INSURANCE COMPANY

# APPLICATION FOR EQUI-VEST STRATEGIES TSA (SERIES 901) GROUP FLEXIBLE PREMIUM COMBINATION FIXED AND VARIABLE DEFERRED ANNUITY CONTRACT

(Consisting of Parts A and B)

Part A

Section 1 - Applic	ation and Agreement	for Participa	tion in EQUI-	VEST Strategies	Contract	*		
I. Type of EQUI-VEST Strategies Contract	☐ TSA 403(b) Public ☐ TSA 501(c)(3) ☐ TSA Higher Eduction Is the Plan subject to (Note: A government)	cation (College	∕es □No		et to ERISA)			
2. Employer and Plan Information	Employer's Name: _ Employer's Address			J.S., Registered Re			ranch.)	
		Attention City		tate	Zip Code		Section (	
	Employer's Taxpaye  Plan Name:  Plan Contact Person						······································	
3. Broker of	Telephone Number:							
Record's Name and Code Number	Code Number:	(For Intern	al Use Only)					
Plan Effective Date	Indicate the date the  YearMo		p effectDay	_				

5. Administrative	Annual Administrative Charge for each Certificate on the last day of each Participation Year is to be:
Charge Payment	Deducted from each Participant's Account Value
	Paid by the Employer  Note: Plans that elect to pay the annual administrative charge must have a minimum of 5 Participants at the
	time the Unit is established.
6.	
Loan Information	Does the Plan permit Participants to take loans? ☐ Yes ☐ No
	Unless you or your designee provides us with the loan interest rate on Participant loan requests, AXA Equitable will set the loan interest rate. We will use the rate as published in the Wall Street Journal for the Prime Interest Rate +1.00% on a calendar monthly basis.
	Does the plan have a limit on the number of loans that a Participant can have under this Contract?
	□Yes □No
	If Yes, please provide the maximum number of loans permitted under the Plan:
7	
Hardship Withdrawal Information	Does the Plan permit Participants to take Hardship Withdrawals? □Yes □No
8. Catch-Up	Does the Plan permit Catch-Up Contributions? (select one box only)
Contributions	☐ Age 50
	□ 15 Years of Service □ Both Age 50 and 15 Years of Service □ None
	_ rone
9. Direct	Does the Plan permit:
Rollovers, Transfers and	Direct Rollover Contributions?
Exchanges	Direct Transfer Contributions that are Contract Exchanges under the same Plan?  \Begin{array}{c} Pyes & \Box No \end{array}
	If Contract Exchanges are permitted, indicate the vendors with whom they can be made:
	☐ All vendors named in the Plan for Contributions, Transfers and Exchanges ☐ Only those vendors named in the Plan for Transfers and Exchanges
	Other (specify):
	Indicate on the 403(b) Plan Approved Provider List on page 11, all vendors that are approved 403(b) Contract providers under the Plan for accepting Transfers and Exchanges.
10. Payouts	Indicate all methods of payout that are permitted under the Plan (Not to exceed single or joint life expectancy):
Permitted Under the	☐ All payout methods available under the Plan's funding vehicles
Plan	□ Single Sum □ Periodic Payment
	□ Annuity Payments
	Other (specify):

11. Existing Plan Assets	Upon takeover, are existing Plan assets being transferred to an unallocated account maintained by the Contract until such Plan assets can be allocated to the Certificates of the Participants?   Indicate which sources (Contribution types) can be made under this Plan. A maximum of 8 sources will be								
Indicate which sources (Contribution types) can be made under this Plan. A maximum of 8 sources of available for each Plan.  For Intern						s will be rnal Use Oni	lv		
	i. Employee Salary Contributions under a Plan. (For periodic C the Plan.)	a salary reduc	ction agreeme	ent that an en	nployee enter	s into with th	e Employer	under the	
	a. □ Pr	e-Tax Contri esignated Rot	butions th Contribution	ons				O H	
	ii. □ Employer Qu Contributions made be forth in the Code. (On	y the Employ	yer to meet tl	he requireme			on tests set	V	
	iii. □ Employee No Amounts reported by section 415 of the Co	the Employe	er as having N	Non-Roth pos				<b>I</b>	
	iv.	ons matching	Employee C					<b>J</b>	
	v.   Employer Non-Matching Discretionary Contributions:  L								
	vi. □ Rollover Contributions:  Contributions of eligible rollover distributions directly or indirectly from eligible retirement  Plans under the Code.								
	vii. □ Designated R Contributions of eligi retirement Plans unde	ble Roth roll			or indirectly	r from eligibl	<b>e</b>	<b>z z</b>	6
	viii. □ 403(b)(7) En (Direct Transfer of an				aintained for	the Participa	nts by the Pl	G an).	
	ix. □ 403(b)(7) En (Direct Transfer of an			l accounts m	aintained for	the Participa	nts by the Pl	an)	
13. Vesting	Does your Plan docu	ment specify	a vesting sch	nedule for En	nployer Cont	ributions? [	⊐Yes □N	0	
Schedule	If yes, please indicat	e the vesting	schedule for	your Plan:					
									1
	Period of Vesting Service	Schedule A	Schedule B	Schedule C	Schedule D	Schedule E	Schedule F	Schedule G TBD by	
	< 1 Year	0%	0%	0%	0%	0%	0%	Client	- 1
	1 - 2 Years	100%	0%	0%	0%	0%	0%		1
	2 - 3 Years	100%	100%	0%	0%	0%	20%		1
	3 - 4 Years	100%	100%	100%	0%	0%	40%		14
	4 - 5 Years	100%	100%	100%	100%	0%	60%		11,
	5 - 6 Years	100%	100%	100%	100%	100%	80%		+
	6 Years or >	100%	100%	100%	100%	100%	100%	<u> </u>	

14. Frequency of Plan Contributions	□Monthly □Semi-Monthly □Bi-Weekly 🕏
15. Designated Plan	
Administrator	Name of Plan Administrator Telephone Number
(If other than the Employer)	Address City State Zip Code
Charles Lagrange (Line Lagran) - Sale Charles (Line Lagran) - Sale Lagran (Line Lagran) - Sale Lagran	Contact Person Name, Title Email Address Fax Number
16. Designated Plan Administrator Fee	If a Designated Plan Administrator is indicated, the Plan Administrator's fee is to be deducted from each Participant's Account Value: □ Yes □ No
	If yes, indicate amount for each Participant: \$
	Frequency:  Annually Quarterly Monthly 9
17. Transaction Authorization	Please indicate whether or not Participants are authorized to execute the following transactions without the Employer's approval:  Investment Option Transfers Allocation Changes Withdrawals (Hardship, Third Party Transfers) Loans Surrenders (Full termination)  Pyes No Surrenders (Full termination)
18. Authorization Information	If Employer's approval is required for any of the items above, please provide us with the following: The individual(s) authorized to approve transaction(s) (i.e. loans, withdrawals etc.) is (are):
	Name: Signature:
	Telephone Number: Effective Date:
19.	Please select the investment option method that will be available to Plan Participants (select only one):
Investment Options	<ul> <li>(a) □ Make their own investment choices (Either Maximum Transfer Flexibility, or Maximum Investment Option Choice)</li> <li>(b) □ Have Maximum Transfer Flexibility</li> <li>(c) □ Have Maximum Investment Option Choice</li> </ul>

Note: This Sect more than one l required for each	n Location and Contribution Reminder Statement Information ion must be completed if the Plan wants to receive Contribution Reminder Statements. I location that wants to receive a Contribution Reminder Statement, a fully completed Secon location designated. A copy of Section II may be reproduced locally.	
20. Plan	Does the location request Contribution Statements?	No
Location Information	Is the Location Name the same as the Employer Name?  Is the Location Address the same as the Employer Address?  If either the Location Name or Address is different from the Employer Name or Address ple	No
	following:	in the second se
	Attention of:	- इङ्ग्लेश
	Location Address:	
	City State Zip Code	•
21, Contribution Statements	Information for the Contribution Statements:  a. Contribution Due Date (choose the 1 <sup>st</sup> through 28 <sup>th</sup> of the month)  Month	ou. The second of the second o
22. Location Contact Information	Location Contact Person:  Location Contact Person's Telephone Numberextension	
23. Mailing Information	Confirmation Notices and Statements of Account will be mailed to the Participants.	

FOD PDOCESS	ING USE ONLY:	
FOR PROCESS.	MO USE ONLI.	
PLAN ID:	LOCATION	
for the second second		

3/11/ Section III - Trust Participation and Contract Holder Information 24. The Employer and Plan Trustee hereby adopt and agree to participate in the Group Variable Deferred Trust Flexible Premium Annuity Trust of AXA Equitable Life Insurance Company ("Trust") its successors and Participation assignees. and Contract Holder ☐ Yes ☐ No (Note: If yes, the "Trust" will be the Contract Holder.) Information If the response above is no, specify the name of Contract Holder to be designated under the Contract: (check the appropriate box) (Generally for ERISA Plans) (i) The Employer identified on page 1 (ii) Other (Please Specify) Name of the Trust: Address of the Trust: Street and Number City State

thall began

Section IV - Basic	Installation Information		
25. Administration Information	Type of Employer Organization:  Church Group  City College / University  Post-Secondary School  Governmental Entity  Other:	☐ Hospital ☐ Public School ☐ IRC 501(c)(3) Organization	☐ Healthcare Organization ☐ State College/ University ☐ Vocational School
		Please Specify	

Certain Contract Provisions

I. Investment Options - (Contract Section 2.01)

The Investment Options currently available under the Contract are listed in Attachment A. One of the following two methods for selecting your Investment Options is available under the Contract:

- 1) Maximum Investment Options: Participants may allocate Contributions or transfer funds to both Type A and Type B Investment Options. The Options currently available are listed in Attachment A (the Investment Options Chart). However, there will be restrictions on the amounts that can be transferred out of the Guaranteed Interest Option.
- 2) Maximum transfer flexibility: Participants may allocate Contributions to any available Investment Options under Type A. No restrictions will apply to amounts that can be transferred out of the Guaranteed Interest Option.
- II. Guaranteed Interest Option (Contract Section 2.02)
  Minimum Guaranteed Interest Rate: Not less than 1% and not more than 3%.
- III. Minimum Aggregate Contributions (on an annual basis) (Contract Section 3.01) \$0 \$5 Million
- IV. Allocations (Contract Section 3.02)

Restrictions on Allocations into the Guaranteed Interest Option: No more than 25% of any contribution may be allocated to the Guaranteed Interest Option. We may suspend these allocation restrictions upon notice to you. We will advise you of any such liberalization. We will also advise you at least 45 days in advance of the day we intend to reimpose any such restrictions, unless we have previously specified that date when we notified you of the liberalization.

V. Transfer Rules – (Contract Section 4.02)

The provisions of Section 4.02 of the Contract shall govern except that the maximum percentage of the amount in the Guaranteed Interest Option, which may be transferred, as described in Section 4.02 of the Contract, is the greater of 25% or the total amount transferred during the previous twelve months.

Restrictions on Transfers into the Guaranteed Interest Option: Transfers into the Guaranteed Interest Option will not be permitted if it would result in more than 25% of the Annuity Account Value to be in the Guaranteed Interest Option. We may suspend these transfer restrictions upon notice to you. We will advise you of any such liberalization. We will also advise you at least 45 days in advance of the day we intend to reimpose any such restrictions, unless we have previously specified that date when we notified you of the liberalization.

VI. Withdrawal Charges – (Contract Section 9.01)

For Plans subject to a Withdrawal Charge, each Participation Year, the Participant is permitted to withdraw up to 10% of the Annuity Account Value (less any prior withdrawals and associated withdrawal charges in the current Participation Year, [and less any amount in the Loan Reserve Account]) without incurring a Withdrawal Charge.

The Withdrawal Charge will be assessed as a percentage of the amount withdrawn starting from the Participation Date of each Participant's Certificate as follows:



• 10 Years: 6%, 6%, 6%, 6%, 6%, 5%, 4%, 3%, 2%, 1%, or

7 Years: 6%, 6%, 5%, 4%, 3%, 2%, 1%, or

• 5 Years: 5%, 5%, 5%, 5%, 5%, or

None, or

15

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The Withdrawal Charge will be assessed as a percentage of each Contribution withdrawn attributable to Contributions made during the current and five prior Participation Years based on the following percentages:

- 5%, 5%, 5%, 5%, 5%, 5%, or
- 5%, 5%, 5%, 5%, 5% until the beginning of the 13<sup>th</sup> Participation Year when the charge becomes zero, or

The Withdrawal Charge will be assessed as a percentage of the amount withdrawn from each Participant's Certificate starting from the Contract Date of the Group Contract as follows:

• 5 Years: 5%, 5%, 5%, 5%, 5%

• 3 Years: 6%, 6%, 6%



## No withdrawal charge will apply when: (Standard Waivers)

- 1) after 5 Participation Years, the Participant reaches age 55 and severs from employment; or
- 2) the later of the completion of at least five Participation Years and the Participant's attainment of 59 1/2; or
- a request is made for a refund of a Contribution in excess of the amount that may be contributed under Section 403(b) of the Code within one month of the date on which the Contribution is made; or
- 4) the Participant's attainment of age 55, the completion of at least five Participation Years and the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase an eligible Annuity Certain; or
- 5) the Participant's completion of at least three Participation Years and the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase a Period Certain Annuity, where the certain period of such annuity is least ten years; or
- 6) the receipt by AXA Equitable of a properly completed settlement election form providing for the application of the Annuity Account Value to purchase a life annuity distribution, pursuant to the terms of this Contract; or
- 7) the Participant dies and a death benefit is payable to the Beneficiary; or
- 8) the withdrawal is made to satisfy minimum distribution requirements under Code Section 401(a)(9); or
- 9) the Participant elects a withdrawal that qualifies as a hardship withdrawal under the Code; or
- 10) the Participant has qualified to receive Social Security disability benefits as certified by the Social Security Administration; or
- 11) AXA Equitable receives proof satisfactory to us that the Participant's life expectancy is six months or less, and such proof must include, but is not limited to, certification by a licensed physician; or
- 12) the Participant has been confined to a nursing home for more than 90 days (or such other period, as required in your state) as verified by a licensed physician. A nursing home for this purpose means one that is (a) approved by Medicare as a provider of skilled nursing care service, or (b) licensed as a skilled nursing home by the state or territory in which it is located (it must be within the United States, Puerto Rico, U.S. Virgin Islands, or Guam) and meets all of the following:
  - its main function is to provide skilled, intermediate, or custodial nursing care;
  - it provides continuous room and board to three or more persons;
  - it is supervised by a registered nurse or licensed practical nurse;
  - it keeps daily medical records of each patient;
  - it controls and records all medications dispensed; and
  - its primary service is other than to provide housing for residents.

The withdrawal charge will apply if the condition as described in items 10 through 12 existed at the time the [Participant's Certificate is issued][Contract is issued] or if the condition began within the 12 month period following the issuance of the [Participant's Certificate][Contract].

(Benefit Sensitive Waiver)

13) the Participant severs from employment.



VII. Third Party Transfer (Contract Section 9.02)

Currently \$25. AXA Equitable reserves the right to charge a maximum of \$65 for each occurrence of a withdrawal for any reason, to cover administrative processing costs.

VIII. Annual Administrative Charge - (Contract Section 9.04)

If applicable, the annual administrative charge will be deducted from each certificate on the last day of each Participation Year as follows:

- The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$30; waived at an annuity account value of \$15,000 or more, or
- The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$30; waived at an annuity account value of \$25,000 or more, or
- The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$15; waived at an annuity account value of \$15,000, or more, or
- The lesser of 2% of the annuity account value plus any prior withdrawals made during the Participation Year or \$15; waived at an annuity account value of \$25,000, or more, or
- None 19
- IX. Variable Separate Account Charge (Contract Section 9.06) 0.00% 2.00%
- X. | Participant Accounts (Contract Section 8.01) and Termination of the Contract (Contract Section 11.08)

Participant consent is required for the Employer to make withdrawals from or terminate a Participant account under the Contract. It is the Employer's responsibility to obtain Participant consent.

403(b) Plan Approved	The Vendor(s) named below is/are the approved 403(b) Contract Provider(s) under the Employer's Plan for ongoing Contributions and/or the acceptance of Transfers & Exchanges until notified otherwise.					
Provider List		Important Note: The Provider contact information entered below must be for the vendor's service/processing office, not that of the Registered Representatives who are representing the vendor.				
	Contact Information					
			Payroll Deduction			
	Provider Name/Address  AXA Equitable EQUI-VEST Processing Office 100 Madison Street, Suite 1000 Syracuse, NY 13202	Name / Email (required) / Phone / Fax  AXA Equitable 403(b) Desk Ph. (315) 477-4156 or (315) 477-4157 Fax (315) 477-2858 Email: 403bdesk@axa-equitable.com	Contributions	Transfers	Exchanges	
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## Acknowledgements and Agreement

When you sign this Application, you are agreeing to the elections that you have made in this Application and acknowledge that you understand the terms and conditions set forth in this Application.

By signature(s) on the next page of duly authorized person(s), the Employer and or the Trustee(s) if applicable, hereby:

- 1. acknowledge having received and read the most current EQUI-VEST Strategies Prospectus and the Prospectus Supplement(s) for participation under the Contract.
- 2. acknowledge, understand and agree to: the elections made in this Application, the various levels of fees, charges, and funding arrangements under the Contract.
- 3. acknowledge and represent that the Plan meets the requirements of Section 403(b) of the Internal Revenue Code and is sponsored by an eligible Employer, and further acknowledge if the answer to the question (page 1) in Part A, states so, that the Plan is subject to the Employee Retirement Income Security Act of 1974, as amended (ERISA);
- 4. apply for participation in the Contract as funding vehicle for the Plan;
- 5. agree to be bound by the terms and conditions of the Contract;
- acknowledge and understand that no Registered Representative has authority to make or modify any contract or agreement on AXA Equitable's behalf, or to waive or alter any of AXA Equitable's rights or requirements; and
- 7. acknowledge and agree that the provisions contained in this Application and the Contract issued upon acceptance of this Application by AXA Equitable supersede all prior agreements that may have previously been entered into between the Employer and AXA Equitable.
- 8. acknowledge, understand and agree that all forfeiture funds, if any, will be re-allocated among remaining Participants to offset future Employer contributions.
- 9. acknowledge, understand and agree that assets transferred from a prior funding vehicle are received by AXA Equitable, such assets will be deposited as one lump sum to an Unallocated Account in the Guaranteed Interest Option. Assets shall remain in this account until all forms are completed and until all information needed to complete the transfer is received by AXA Equitable. With respect to each Participant, AXA Equitable will allocate amounts to each Participant's Certificate only after you provide instructions that are acceptable and necessary in order to complete the allocation process. Once all the necessary information is received and has been determined to be acceptable by AXA Equitable, AXA Equitable will allocate such amounts to each Participant's Certificate. You are solely responsible for effectuating the asset transfer in accordance with all applicable laws and regulations.
- 10. understand that by identifying the Designated Plan Administrator (page 4) and signing on the next page, the Employer and or the Trustee(s) are authorizing AXA Equitable to provide information regarding the Plan and Plan Participants to them.
- 11. understand that the Annuity Account Value attributable to allocations to the Variable Investment Options may increase or decrease and are not guaranteed as to dollar amount.
- 12. understand that the Employer's legal counsel and/or advisor should determine that there are no local or state laws, rules and/or regulations which prohibit the investment of Plan assets in the Contract and in the Investment Options indicated on **Attachment A** of this application.

	FOR CONTRACT HOLDER(S): (If the Contract Holder is the Employer or the T Section III, complete (a) below; If the Contract Holder is other than the Employer (a) and (b) below.)  (a)		
	Print Name of Authorized Individual/Employer City		State
	Ву		o Desarro
	Signature and Title of Authorized Individual/Employer		Date
	(b)Print Name of Authorized Individual/Trustee City		State
	BySignature and Title of Authorized Individual/Employer		Date
Accepted for AXA Equitable (To be completed	ACCEPTED FOR AXA EQUITABLE:		
by the AXA Equitable	Print Name of Authorized Signatory  By  Signature of Authorized Signatory		·
Processing Office)	Effective Date:  Group Annuity Contract No		8. 7.
	A copy of the Contract, the Application, including Parts A and B (inc Charges), and Investment Options Chart, will be signed by AXA Equ to the Contract Holder after review. All returned documents will gov the Contract. Initial contributions will be accepted by AXA Equitable installation documents have been approved by AXA Equitable's Proceedings.	itable and ern the ope only after	returned eration of



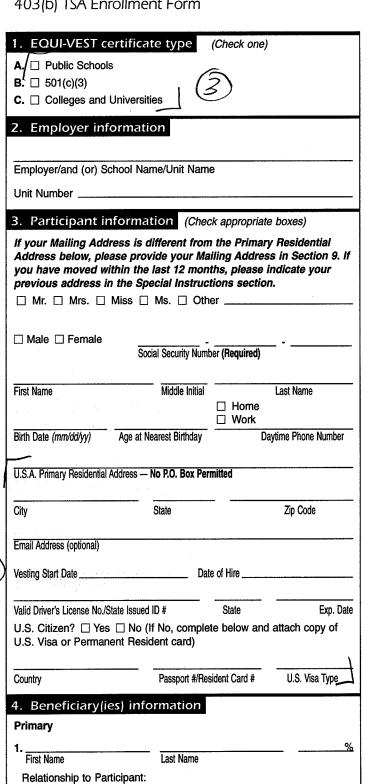
## Attachment A - Investment Options Chart (Series 901)

Type B	Type A	
AXA Conservative Allocation	Guaranteed Interest Option	Fidelity® VIP Contrafund®
AXA Conservative-Plus Allocation	All Asset Allocation	Fidelity® VIP Equity Income
EQ/Core Bond Index	American Century VP Mid Cap Value	
EQ/Core Bond index	Fund	Fidelity VIP Mid Cap
EQ/Franklin Core Balanced	AXA Aggressive Allocation	Goldman Sachs VIT Mid Cap Value
EO/Global Bond PLUS	AXA Moderate Allocation	Invesco V.I. Dividend Growth
EQ/Intermediate Government Bond	AXA Moderate-Plus Allocation	
Index	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Invesco V.I. Global Real Estate
EQ/Money Market	AXA Tactical Manager 400	Invesco V.I. International Growth
EQ/PIMCO Ultra Short Bond	AXA Tactical Manager 500	Invesco V.I. Mid Cap Core Equity
EQ/Quality Bond PLUS	AXA Tactical Manager 2000	Invesco V.I. Small Cap Equity
Invesco V.I. High Yield	AXA Tactical Manager International	Ivy Funds VIP Energy
Ivy Funds VIP High Income	EQ/AllianceBernstein Small Cap Growth	Ivy Funds VIP Mid Cap Growth
Multimanager Core Bond	EQ/AXA Franklin Small Cap Value Core	Ivy Funds VIP Small Cap Growth
Multimanager Multi-Sector Bond	EQ/BlackRock Basic Value Equity	Lazard Retirement Emerging Markets Equity
PIMCO VIT CommodityRealReturn®	EQ/Boston Advisors Equity Income	
Strategy		MFS® International Value
	EQ/Calvert Socially Responsible	MFS® Investors Growth Stock
	EQ/Common Stock Index	MFS® Investors Trust
Carrier Carrier Carrier	EQ/Davis New York Venture	MFS® Technology
	EQ/Equity 500 Index	MFS® Utilities
a second	EQ/Equity Growth PLUS	Multimanager Aggressive Equity
	EQ/Franklin Templeton Allocation	Multimanager International Equity
	EQ/GAMCO Small Company Value	Multimanager Large Cap Value
	EQ/Global Multi-Sector Equity	Multimanager Mid Cap Growth
	EQ/International Core PLUS	Multimanager Mid Cap Value
The second second	EQ/International Equity Index	Multimanager Small Cap Growth
	EQ/International Value PLUS	Multimanager Small Cap Value
	EQ/JPMorgan Value Opportunities	Multimanager Technology
	EQ/Large Cap Core PLUS	Oppenheimer Main Street Fund®/VA
	EQ/Large Cap Growth Index	Structured Investment Option
	EQ/Large Cap Growth PLUS	Target 2015 Allocation
	EQ/Large Cap Value Index	Target 2025 Allocation
	EQ/Large Cap Value PLUS	Target 2035 Allocation
	EQ/Lord Abbett Large Cap Core	Target 2045 Allocation
	EQ/MFS International Growth	Templeton Global Bond Securities \ (22
	EQ/Mid Cap Index	Van Eck VIP Global Hard Assets
	EQ/Mid Cap Value PLUS	of the Arthur A
	EQ/Montag & Caldwell Growth	
	EQ/Morgan Stanley Mid Cap Growth	
	EQ/Mutual Large Cap Equity	
	EQ/Oppenheimer Global	
	EQ/Small Company Index	
	EQ/T. Rowe Price Growth Stock	
	EQ/Templeton Global Equity	
	EQ/Van Kampen Comstock	

## **AXA Equitable Life Insurance Company**

**AXA Distributors, LLC** 

EQUI-VEST® Strategies<sup>SM</sup> (Series 901) Combination Fixed and Variable Deferred Annuity 403(b) TSA Enrollment Form



### Mailing Instructions:

Express Mail: (with money):

JPMorganChase

4 Chase Metrotech Center, 7th Floor NY Remit One Image Lockbox # 13463

Brooklyn, NY 11245-0001 Regular Mail: (with money): EQUI-VEST Unit Annuity Lockbox

P.O. Box 13463 Newark, NJ 07188-0463



Express Mail: (without money): **EQUI-VEST New Business** 100 Madison St., Suite 1000 Syracuse, NY 13202

Regular Mail: (without money): **EQUI-VEST New Business** P.O. Box 4704, Syracuse, NY 13221-4704 For Assistance, please call 800-628-6673



	continued)
2	
First Name Last Name	**************************************
Relationship to Participant:	
☐ Spouse: Male ☐ Female ☐	
☐ Child: Male ☐ Female ☐ ☐ Other:	
T.I.N.: S.S.N.	
Contingent	
1	
First Name Last Name	
Relationship to Participant:	
☐ Spouse: Male ☐ Female ☐	
☐ Child: Male ☐ Female ☐	Same of the second
Other:	
T.I.N.: S.S.N.	
5. Optional feature Enhanced	Death Benefit
If you would like to elect the Enhanced Dea	
following box:	ant belieff, please check the
$\hfill\square$ Yes, I would like to elect the Enhanced	Death Benefit.
6. Contribution amount	
applicable, #6B. If a payment will be provided	1996年1996年 - 1996年 - 1996年 - 1998年 - 1
complete #6C only.  A. Expected first-year contribution:	\$
A. Expected first-year contribution:     Indicate the amount expected to be con in the first year of this certificate.	\$ ntributed
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover all	\$ ntributed <i>mounts)</i>
A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at B. Expected direct transfer or rollover at the second control of	\$ ntributed <i>mounts)</i> mounts: \$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti	\$ mounts) mounts: \$ ion of this
A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera	\$ntributed  mounts)  mounts: \$ ion of this aging, also complete #8
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?	\$ntributed  mounts)  mounts: \$ ion of this aging, also complete #8
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at the control of the control	\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  Yes  No  C. Amount provided with this enrollment	\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at the control of the control	\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options listed in #7.	\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options	\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options listed in #7.  (ii) Provide a breakdown of employee	\$s mounts) mounts: \$s ion of this aging, also complete #8 aging or other eligible  ht form: \$s
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options listed in #7.  (ii) Provide a breakdown of employee	ss mounts) mounts: \$s ion of this aging, also complete #8 aging also rother eligible  ht form:  \$\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options listed in #7.  (ii) Provide a breakdown of employee	ss mounts) mounts: \$s ion of this aging, also complete #8 aging also rother eligible  ht form:  \$\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options listed in #7.  (ii) Provide a breakdown of employee	ss mounts) mounts: \$s ion of this aging, also complete #8 aging also rother eligible  ht form:  \$\$
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options listed in #7.  (ii) Provide a breakdown of employee	smounts) mounts: \$ ion of this aging, also complete #8 i) plan or other eligible  at form:  Smounts: \$ Employee
complete #6C only.  A. Expected first-year contribution: Indicate the amount expected to be con in the first year of this certificate. (Exclude direct transfer or rollover at (i) If you intend to allocate all or a porti amount to Special Dollar Cost Avera (ii) If this is a rollover, is it from a 401(k retirement plan?  ☐ Yes ☐ No  C. Amount provided with this enrollment (i) Total amount for investment options listed in #7.  (ii) Provide a breakdown of employee	ss mounts) mounts: \$s ion of this aging, also complete #8 aging also rother eligible  ht form:  \$\$

☐ Other:

☐ Spouse: Male ☐ Female ☐ ☐ Child: Male ☐ Female ☐

7. Selection of investment options and allocation	% AXA Tactical Manager 2000 (7K*)
percentages	% EQ/AllianceBernstein Small Cap Growth (TP*)
	EQ/AXA Franklin Small Cap Value Core (6E*)
Must check either Box A or Box B, but not both.	% EQ/GAMCO Small Company Value (37*) % EQ/Mid Cap Index (55*)
A.   Maximum Transfer Flexibility. By checking this box, you may invest in the investment options listed in this section which	
are not boxed off. Transfers out of the Guaranteed Interest	% EQ/Morgan Stanley Mid Cap Growth (08*)
Option will not be limited.	% EQ/Small Company Index (97*)
B.   Maximum Fund Choice. By checking this box, you may	% Fidelity® VIP Mid Cap (7U*)
invest in any of the investment options listed in this section.  Transfers out of the Guaranteed Interest Option will be	Goldman Sachs VIT Mid Cap Value (7W*)
limited (see prospectus for details).	// Invesco V.I. Mid Cap Core Equity (7T*)
Current Allocation (Applies to Boxes A and B): Select the allocation	% Invesco V.I. Small Cap Equity (7X*)% Ivy Funds VIP Mid Cap Growth (8M*)
for the contributions indicated in #6A or any amounts that you may	% Ivy Funds VIP Small Cap Growth (7Y*)
invest in these investment options in the future. You can change this allocation for future contributions at any time. The percentages	% Multimanager Mid Cap Growth (59*)
entered below must be in whole numbers and total 100%.	% Multimanager Mid Cap Value (61*)
	% Multimanager Small Cap Growth (36*)
Contribution Allocation	% Multimanager Small Cap Value (91*)
Structured Investment Option Segment ~	International Stocks/Global
% S&P 500 1year -10% Buffer (V1*)	% AXA Tactical Manager International (7N*)% EQ/Global Multi-Sector Equity (78*)
Although not required, you have the ability to choose a Performance Cap Threshold. To choose your Performance	EQ/International Core PLUS (88*)
Cap Threshold, please check the box below and complete	% EQ/International Equity Index (TN*)
the Performance Cap Threshold and Maturity Instructions	
Election Form (#146946). The completed form must be submitted along with this application to our Processing	% EQ/MFS International Growth (26*)
Office.	% EQ/Oppenheimer Global (6A*)
☐ I want to choose a Performance Cap Threshold.	% EQ/Templeton Global Equity (6D*)% Invesco V.I. International Growth (7Z*)
Asset Allocation	% Lazard Retirement Emerging Markets Equity (8H*)
AXA Allocation	
% AXA Aggressive Allocation (18*)	% Multimanager International Equity (65*)
% AXA Moderate Allocation (T4*)% AXA Moderate-Plus Allocation (17*)	AXA Allocation (Not available under Max Flex option)
Target Allocation	% AXA Conservative Allocation (15*)
% Target 2015 Allocation (6G*)	% AXA Conservative-Plus Allocation (16*)
	Bonds (Not available under Max Flex option)
% Target 2035 Allocation (6I*)	% EQ/Core Bond Index (96*)
% Target 2045 Allocation (6J*) Other Asset Allocation	% EQ/Global Bond PLUS (47*)% EQ/Intermediate Government Bond Index (TI*)
% All Asset Allocation (7H*)	EQ/PIMCO Ultra Short Bond (28*)
% EQ/Franklin Templeton Allocation (6P*)	% EQ/Quality Bond PLUS (TQ*)
Large Cap Stocks	% Invesco V.I. High Yield (8L*)
% AXA Tactical Manager 500 (7M*)	% Ivy Funds VIP High Income (8G*)
% EQ/BlackRock Basic Value Equity (81*)% EQ/Boston Advisors Equity Income (33*)	% Multimanager Core Bond (69*)% Multimanager Multi-Sector Bond (TH*)
% EQ/Calvert Socially Responsible (92*)	Templeton Global Bond Securities (8F*)
% EQ/Common Stock Index (T1*)	Cash Equivalents (Not available under Max Flex option)
% EQ/Davis New York Venture (6Q*)	% EQ/Money Market (T3*)
% EQ/Equity 500 Index (TE*)	Sector/Specialty (Not available under Max Flex option)
% EQ/Equity Growth PLUS (94*)	% EQ/Franklin Core Balanced (6C*)% PIMCO VIT CommodityRealReturn®
% EQ/JPMorgan Value Opportunities (72*)% EQ/Large Cap Core PLUS (85*)	Strategy (8E*)
% EQ/Large Cap Growth Index (82*)	Sector/Specialty
% EQ/Large Cap Growth PLUS (77*)	% Invesco V.I. Dividend Growth (8B*)
% EQ/Large Cap Value Index (49*)	"" Invesco V.I. Global Real Estate (8C*)
% EQ/Large Cap Value PLUS (89*)	% Ivy Funds VIP Energy (8D*)
% EQ/Lord Abbett Large Cap Core (05*)	% MFS® Technology (8J*)
% EQ/Montag & Caldwell Growth (34*)	MFS® Utilities (8K*)
% EQ/Mutual Large Cap Equity (6F*)% EQ/T. Rowe Price Growth Stock (32*)	Multimanager Technology (67*)  Wan Eck VIP Global Hard Assets (8N*)
% EQ/Van Kampen Comstock (07*)	Guaranteed-Fixed
% Fidelity® VIP Contrafund® (7R*)	% Guaranteed Interest Option (A1*)
% Fidelity® VIP Equity Income (7S*)	
% MFS® Investors Growth Stock (8I*)	% Total of all investment options chosen for Contribution Allocations must equal 100%
MFS® Investors Trust (7P*)	
% Multimanager Aggressive Equity (T2*)	* The number in parentheses is shown for data input only.
% Multimanager Large Cap Value (58*)% Oppenheimer Main Street Fund®/VA (7Q*)	
Small/Mid Cap Stocks	
% AXA Tactical Manager 400 (7L*)	
VOCE	ADI TSA Enrollment Form

8. Special	Dollar Cost Averaging (Special DCA)
	for direct transfer and rollover contributions. Choose
	d. 100% of the contribution indicated in #6B will be
period selected	pecial DCA unless you specify a dollar amount for the time
3-months:	☐ 100% Allocation or ☐\$
☐ 6-months:	
☐ 12-months:	
transferred up	al DCA allocation column below for amounts to be nder the Special DCA program. You cannot select more
	tment options.
If only allocating	ng a portion of the direct transfer or rollover to Special
DCA, you mus	t complete the contribution allocations listed in #7.
	pice of Maximum Transfer Flexibility or Maximum Fund
in this section.	cated in #7 will also apply to the investment options listed
III tilla acction.	
Special DCA	Allocation
1	estment Option Segment —/
Structured in w	S&P 500 1year -10% Buffer (V1*)
~	Although not required, you have the ability to choose a
	Performance Cap Threshold. To choose your Performance
	Cap Threshold, please check the box below and complete
101	the Performance-Cap Threshold and Maturity Instructions Election Form (#146946). The completed form must be
(と/ -	submitted along with this application to our Processing
	Office.
1	I want to choose a Performance Cap Threshold.
	Note: if you elect the Structured Investment Option as part of your allocation percentages in #7 and elected a
	threshold, the same threshold that you elected will also
	apply to the Structured Investment Option if chosen as
	part of your Special DCA allocations.
Asset Allocation	
AXA Allocation	
	AXA Aggressive Allocation (18*)
%I	AXA Moderate Allocation (T4*) AXA Moderate-Plus Allocation (17*)
Target Allocati	
%	Target 2015 Allocation (6G*)
%	Target 2025 Allocation (6H*)
%	Target 2035 Allocation (6I*)
%	Target 2045 Allocation (6J*)
Other Asset Al	
	All Asset Allocation (7H*)
%	EQ/Franklin Templeton Allocation (6P*)
Large Cap Sto	AXA Tactical Manager 500 (7M*)
%	EQ/BlackRock Basic Value Equity (81*)
%	EQ/Boston Advisors Equity Income (33*)
%	EQ/Calvert Socially Responsible (92*)
<u> </u>	EQ/Common Stock Index (T1*)
%	EQ/Davis New York Venture (6Q*)
%	EQ/Equity 500 Index (TE*)
%	EQ/Equity Growth PLUS (94*)
%	EQ/JPMorgan Value Opportunities (72*)
%	EQ/Large Cap Core PLUS (85*) EQ/Large Cap Growth Index (82*)
% %	EQ/Large Cap Growth Index (82*) EQ/Large Cap Growth PLUS (77*)
%	EQ/Large Cap Value Index (49*)
%	EQ/Large Cap Value PLUS (89*)
%	
%	EQ/Montag & Caldwell Growth (34*)
%	EQ/Mutual Large Cap Equity (6F*)
%	EQ/T. Rowe Price Growth Stock (32*)
%	EQ/Van Kampen Comstock (07*)
%	Fidelity® VIP Contrafund® (7R*)
%	Fidelity® VIP Equity Income (7S*)
%	MFS® Investors Growth Stock (8I*)
%	MFS® Investors Trust (7P*)
% %	Multimanager Aggressive Equity (T2*) Multimanager Large Cap Value (58*)
%	Oppenheimer Main Street Fund®/VA (7Q*)
I ————————————————————————————————————	Opposition main oneon and /v// (/d/)

Small/Mid Cap	Stocks
% <b>\</b>	American Century VP Mid Cap Value (7V*)
%	AXA Tactical Manager 400 (7L*) AXA Tactical Manager 2000 (7K*)
%	EQ/AllianceBernstein Small Cap Growth (TP*)
%	EQ/AXA Franklin Small Cap Value Core (6E*)
%	EQ/GAMCO Small Company Value (37*)
%	EQ/Mid Cap Index (55*)
%	EQ/Mid Cap Value PLUS (79*)
%	EQ/Morgan Stanley Mid Cap Growth (08*)
%	EQ/Small Company Index (97*)
%	Fidelity® VIP Mid Cap (7U*)
% %	Goldman Sachs VIT Mid Cap Value (7W*) Invesco V.I. Mid Cap Core Equity (7T*)
%	Invesco V.I. Small Cap Equity (7X*)
%	Ivy Funds VIP Mid Cap Growth (8M*)
%	Ivy Funds VIP Small Cap Growth (7Y*)
%	Multimanager Mid Cap Growth (59*)
%	Multimanager Mid Cap Value (61*)
%	Multimanager Small Cap Growth (36*)
%	Multimanager Small Cap Value (91*)
International St	AXA Tactical Manager International (7N*)
% %	EQ/Global Multi-Sector Equity (78*)
%	EQ/International Core PLUS (88*)
%	EQ/International Equity Index (TN*)
%	EQ/International Value PLUS (73*)
%	EQ/MFS International Growth (26*)
%	EQ/Oppenheimer Global (6A*)
%	EQ/Templeton Global Equity (6D*)
%	Invesco V.I. International Growth (7Z*)
% %	Lazard Retirement Emerging Markets Equity (8H*) MFS® International Value (8A*)
%	Multimanager International Equity (65*)
	(Not available under Max Flex option)
AAA Allocatio	
<b></b> %	AXA Conservative-Plus Allocation (16*)
% Bonds (Not av	AXA Conservative-Plus Allocation (16*) railable under Max Flex option)
Bonds (Not av	AXA Conservative-Plus Allocation (16*) railable under Max Flex option) EQ/Core Bond Index (96*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)
Bonds (Not av % %	AXA Conservative-Plus Allocation (16*)  allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)
Bonds (Not av ————————————————————————————————————	AXA Conservative-Plus Allocation (16*)  allable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  aliable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  aliable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ints (Not available under Max Flex option)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ints (Not available under Max Flex option)  EQ/Money Market (T3*)  ity (Not available under Max Flex option)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  ints (Not available under Max Flex option)  EQ/Money Market (T3*)  ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  nts (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  railable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Fanklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Technology (8J*)  MISS® Utilities (8K*)  Multimanager Technology (67*)
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Technology (8J*)  MISI GROW (15*)  MISI GROW (15*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)
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Bonds (Not av	AXA Conservative-Plus Allocation (16*)  railable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)  Total of all investment options chosen for Special DCA Allocations must equal 100%
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  ailable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  mts (Not available under Max Flex option)  EQ/Money Market (T3*)  ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Invesco V.I. Dividend Growth (8B*)  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)  Total of all investment options chosen for Special
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  railable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)  Total of all investment options chosen for Special DCA Allocations must equal 100%
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  railable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)  Total of all investment options chosen for Special DCA Allocations must equal 100%
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  railable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)  Total of all investment options chosen for Special DCA Allocations must equal 100%
Bonds (Not av	AXA Conservative-Plus Allocation (16*)  railable under Max Flex option)  EQ/Core Bond Index (96*)  EQ/Global Bond PLUS (47*)  EQ/Intermediate Government Bond Index (TI*)  EQ/PIMCO Ultra Short Bond (28*)  EQ/Quality Bond PLUS (TQ*)  Invesco V.I. High Yield (8L*)  Ivy Funds VIP High Income (8G*)  Multimanager Core Bond (69*)  Multimanager Multi-Sector Bond (TH*)  Templeton Global Bond Securities (8F*)  Ints (Not available under Max Flex option)  EQ/Money Market (T3*)  Ity (Not available under Max Flex option)  EQ/Franklin Core Balanced (6C*)  PIMCO VIT CommodityRealRetum® Strategy (8E*)  Ity  Invesco V.I. Global Real Estate (8C*)  Ivy Funds VIP Energy (8D*)  MFS® Technology (8J*)  MFS® Utilities (8K*)  Multimanager Technology (67*)  Van Eck VIP Global Hard Assets (8N*)  Total of all investment options chosen for Special DCA Allocations must equal 100%

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## 9. Special instructions A and B must be completed. Use this section to enter the participant's mailing address if it differs from the primary residential address. Also, for any additional details regarding A. Replacement Information: (Must Respond to 1 and 2.) beneficiary, replacement, or transfer information. 1. Do you have any other existing life insurance or annuities? For Participants whose Mailing Address differs from their Primary ☐ Yes ☐ No Residential Address in #3. Participant's Mailing Address: 2. Will any existing life insurance or annuity be (or has it been) surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this Mailing Address - P.O. Box Accepted transaction assuming the certificate applied for will be issued? ☐ Yes ☐ No State City Zip Code If Yes, fully complete the following information (if more than 3. companies are replaced, provide details in Special Instructions section): Year Issued Type of Plan Company Contract Number Company Address Type of Plan Contract Number Year Issued Company Company Address 372 44 Year Issued Type of Plan Contract Number Company Company Address **B. Certificate State:** The Certificate state is your state of primary residence (Your primary residential address from Section 3) unless you sign the enrollment form in a different state. If you are signing this enrollment form in a state other than your state of primary residence, check one box below: ☐ I have a second residence in the state of sale. $\hfill\square$ I work or conduct business in the state of sale. If none of the above apply, the enrollment form must be signed in your state of Primary Residence, unless we approve another state.

10. Other Required Information (Mandatory)

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ADL TSA Enrollment Form Cat. No. xxxxxx (5/11) Page 4 of 5

11. Broker Transfer Authorization						
☐ Yes, by signing this enrollment form, I hereby designate my registered representative named in EQUI-VEST Representative Report to act as my agent in giving investment option transfer instructions by telephone or electronically, and I authorize AXA Equitable to act on such instructions. I understand that AXA Equitable (i) may rely in good faith on the stated identity of a person placing such instructions, and (ii) will have no liability for any claim, loss, liability, or expense that may arise in connection with such instructions. AXA Equitable will continue to act upon this authorization until such time as it receives my written notification of a change at its processing office. AXA Equitable may (i) change or terminate telephone or electronic or overnight mail transfer procedures at any time without prior notice, and (ii) restrict fax, internet, telephone and other electronic transfer services because of disruptive transfer activity.						
12. Agreement						
BY SIGNING THIS ENROLLMENT FORM, I ACKNOWLEDGE THA	T:		and the second second second			
• Amounts withdrawn from the certificate may be subject to a make or modify any certificate on behalf of AXA Equitable, o Employer maintains a Plan that is intended to meet the requiemployer may authorize and instruct AXA Equitable to share exchange of information to meet the requirements of the Codinstruct and require AXA Equitable to deduct a plan operating recordkeeping services under the Plan; such amount will be enrollment form I acknowledge that I am buying the certificate feature of the certificate does not provide additional benefits and complete to the best of my knowledge and belief. • I until the variable investment options of the separate account are not guaranteed as to dollar amount. • I acknowledge supplement(s). • After reviewing my financial information certificate will meet my financial goals.	withdrawal charge. • No Regis r to waive or alter any of AXA E irements of Section 403(b) of the my personal information with u de. • If my Employer maintains a gexpense from my account value remitted to a party not affiliated to for its features and benefits of All information and statement derstand that the annuity according or variable annuity benefit pathat I have received the most	equitable's right internal Right int	phts and regulations. • If my evenue Code (the "Code"), my ird parties to facilitate the 3(b) plan, my Employer may radministrative and quitable. • By signing this deferral, as the tax deferral in this enrollment form are true attributable to allocations to by increase or decrease and ospectus and any			
Consent for Delivery of Initial Prospectus on CD-ROM:						
☐ <b>Yes.</b> By checking this box and signing the enrollment for readable compact disk "CD", and I am able to access the CL must print it. Lalso understand that I may request a prospe 1-877-222-2144, and that all subsequent prospectus updates AXA Equitable's Electronic Delivery Service.	D information. In order to retain ctus in paper format at any time	the prospect by calling (	tus indefinitely, I understand that Customer Service at			
Electronic Delivery Information:						
By checking this box, providing my email address, and some further information about enrolling in AXA Equitable's eleprospectus mailings electronically.	signing the enrollment form belo ctronic delivery so that I may re	ow, I am requeceive all sta	uesting that AXA Equitable send tements, confirms and			
By signing this enrollment form the Participant acknowledges t	that he or she is buying the certif	ficate for its	eature and benefits other than tax			
deferral, as the tax-deferral feature of the certificate does not p						
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			A West Steel			
Proposed Participant's Signature	Today's Date (mm/dd/yy)	City	State			
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## EQUI-VEST® REGISTERED REPRESENTATIVE INFORMATION Please print in black ink.

## All questions must be answered.

	Does the Proposed Participant have any			- N.			
	Do you have reason to believe that any existing life insurance or annuity has been or will be surrendered, withdrawn from, loaned against, changed or otherwise reduced in value, or replaced in connection with this transaction, assuming the certificate applied for will be issued on the life of the participant?   Yes  No						
	Did you (i) verify the identity by reviewing the driver's license/passport of the Proposed Participant (ii) inquire about the source of the customer's assets and income and (iii) confirm that the Proposed Participant is not (nor is a family member of or associated with) a foreign military, government or political official? $\square$ Yes $\square$ No						
	Is the Proposed Participant currently an Active Duty* Member of the Armed Forces? ☐ Yes ☐ No						
	(If Yes, you must also submit a completed THE ARMED FORCES).	d and signed LIFE INSUR	ANCE/ANNUITY DISCLO	SURE TO ACTIVE DU	TY MEMBERS OF		
N	* "Active Duty" means full-time duty in the active military service of the United States and includes members of the reserve component (National Guard and Reserve) while serving under published orders for active duty or full-time training. The term does not include members of the reserve component who are performing active duty or active duty for training under military calls or orders specifying periods of less than 31 calendar days. Name and Signature of the Registered Representative who answered the above questions and verified the above						
1	documents.						
-	Print Name	Signat	ure	Date			
	er/Dealer Name:er/Dealer Email Address:				1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
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Brok			Representative Code	Representative %	Client Account Number at Broker/Dealer		
Broke	er/Dealer Email Address:  Print  Registered Representative(s) Name(s)	Last Four Digits of the	Representative Code	Representative	Client Account Number at		
Brok	er/Dealer Email Address:  Print  Registered Representative(s) Name(s)	Last Four Digits of the	Representative Code	Representative	Client Account Number at		
Broke	er/Dealer Email Address:  Print  Registered Representative(s) Name(s)	Last Four Digits of the	Representative Code	Representative	Client Account Number at		
Broke	er/Dealer Email Address:  Print  Registered Representative(s) Name(s)	Last Four Digits of the	Representative Code	Representative	Client Account Number at Broker/Dealer		
Broke	er/Dealer Email Address:  Print  Registered Representative(s) Name(s)	Last Four Digits of the	Representative Code	Representative	Client Account Number at Broker/Dealer		

AXA EQUITABLE LIFE INSURANCE COMPANY New York, New York 10104 SERFF Tracking Number: ELAS-127280657 State: Arkansas
Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 49074

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

## **Supporting Document Schedules**

Item Status: Status

Date:

Bypassed - Item: Flesch Certification

Bypass Reason: Not applicable - no Flesch Score/Cert for SEC product/Variable Annuity.

**Comments:** 

Item Status: Status

Date:

Bypassed - Item: Application

Bypass Reason: See Form Schedule.

Comments:

Item Status: Status

Date:

Bypassed - Item: Life & Annuity - Acturial Memo

Bypass Reason: No Actuarial Based Memorandum for this app./enrollment form filing.

**Comments:** 

Item Status: Status

Date:

Satisfied - Item: Filing Letter

Comments:

Corrected error on filing letter (wrong filing for TSA product).

**Attachment:** 

AR EQ 901 TPA Filing Ltr Comick Lisa.pdf

Item Status: Status

Date:

Satisfied - Item: Variable Text Memorandums

Comments: Attachments:

SERFF Tracking Number: ELAS-127280657 State: Arkansas
Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 49074

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

VTM - Gen - 401a Series 901 Employer Application (2009 401(a).pdf

VTM - Gen - 401a SERIES 901 SIO Enrollment Form (GENERIC) - 6-15-2011.pdf

VTM - Gen -TSA SERIES 901 Enrollment Form (GENERIC).pdf

VTM - Gen - EDC SERIES 901 Employer Application.pdf

VTM - Gen - EDC SERIES 901 Enrollment Form (GENERIC).pdf

VTM - Gen - TSA SERIES 901 Employer Application - 3rd Party App Backup 6-14-2011.pdf



Lisa Comick Policy Drafting Manager Annuity Product Management & Filing

June 17, 2011

The Honorable Jay Bradford Commissioner Arkansas Department of Insurance 1200 W. Third Street Little Rock, AR 72201-1904

Attn.: Policy & Other Form Filings

RE: AXA Equitable Life Insurance Company

**NAIC No.:** 968-62944 **FEIN** 13-5570651

**Application form nos.** 2011 EV STRAT 401(a), 2011 EV STRAT EDC and 2011 EV STRAT TSA **Enrollment form nos.** EV STRAT 401(a) 2011, EV STRAT EDC 2011 and EV STRAT TSA 2011

### Dear Commissioner:

We are filing with the Department for approval the above referenced application and enrollment forms. These are new forms and will not replace any existing forms.

Application form no. 2011 EV STRAT 401(a) and Enrollment form no. EV STRAT 401(a) 2011 will be in the 401(a) plan market.

Application form no. 2011 EV STRAT EDC and Enrollment form no. EV STRAT EDC 2011 will be used in the Employee Deferred Compensation (EDC) market.

Application form no. 2011 EV STRAT TSA and Enrollment form no. EV STRAT TSA 2011 will be used in the Tax Sheltered Annuity (TSA) market.

Form No.	For Use With Previously Approved Form
2011 EV STRAT 401(a)	Contract 2009401aGAC901, approved by the Department on 06/16/2009,
	under State Tracking no. ELAS-126181016
EV STRAT 401(a) 2011	Certificate 2009401a901-A, approved by the Department on 06/16/2009,
	under State Tracking no. ELAS-126181016
	Contract 2009EDCGAC901, approved by the Department on, 06/16/2009
2011 EV STRAT EDC	under State Tracking no. ELAS-126185148
	Certificate 2009EDC901-A, approved by the Department on 06/16/2009
EV STRAT EDC 2011	under State Tracking no. ELAS-126185148
2011 EV STRAT TSA	Contract 2008TSAGAC901, approved by the Department on 12/19/2009,
	under State Tracking no. ELAS-125933118
EV STRAT TSA 2011	Certificate 2008TSA901-A, approved by the Department on 12/19/2009,
	under State Tracking no. ELAS-125933118

We are also enclosing a Memorandum of Variable Material for each of the Applications. Due to a recent change in law, the state of New York no longer requires filing of this type of form for use outside of New York. Instead, New York now requires that we file annually, a list identifying and describing the policy forms issued by us for delivery outside New York. The required filing fee will be sent by express mail or EFT. We request that information contained in this letter and any attachments hereto be treated as confidential and be exempted from disclosure in accordance with the state's Freedom of Information law or other similar laws, and we be notified prior to any proposed release of this information.

If you have any questions or need any additional information, please call me at (212) 314-3562 or Greg Prato at (212) 314-5710. Thank you.

Sincerely,

Lisa Comick

Policy Drafting Manager

sa f. Comick

### AXA EQUITABLE LIFE INSURANCE COMPANY

Memorandum of Variable Material for

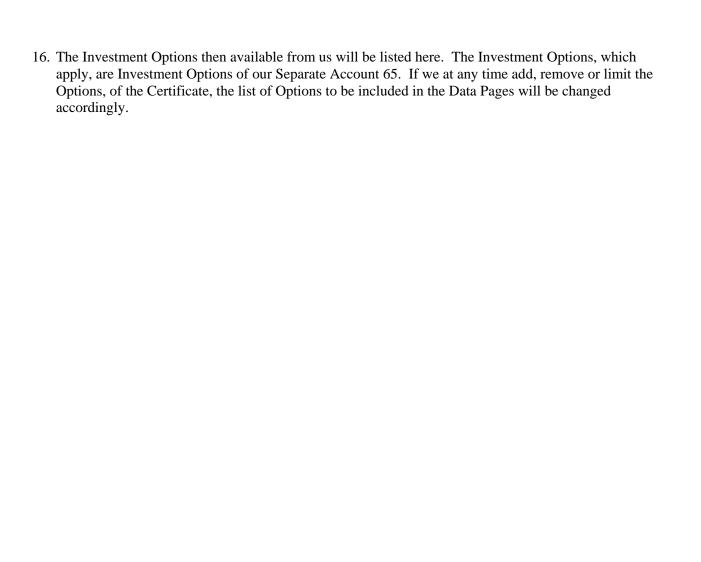
## Group Employer Application No. 2011 EV STRAT 401(a) (and any variation thereof)

for use with Group Contract No. 2009401aGAC901 (and any variation thereof).

The following comments describe the nature and scope of the illustrative and variable material in the Employer Application. It is numbered to correspond to the order in which they appear in the bracketed areas on the form indicating that they may change.

## **Group Employer Application Form 2011 EV STRAT 401(a)**

- 1. We may change how the annual administrative charge is to be paid. The number of participants required in order to have the Plan pay the annual administrative charge may change. The number will range from 5-25.
- 2. The Plan Administrator's fee will only appear on the Application if there is indication that there is a Plan Administrator and we are instructed by the Employer to withdraw the fee from the Participant's account.
- 3. The frequency of Plan Contributions may change to weekly, monthly, quarterly or annually.
- 4. We may add additional transactions that the Participant may execute without Employer approval i.e. loans, withdrawals or surrenders.
- 5. We may revise the Sources of Contributions in the future based on changes in the Code or any regulations.
- 6. The frequency of Contribution statements may change and we may offer these statements on a weekly or annual basis.
- 7. We reserve the right to limit the amount that may be allocated to the Guaranteed Interest Option to no more than 25% of each Contribution. The percentage limit may range from 10% to 100%.
- 8. The percentage that may be transferred from the Guaranteed Interest Option may change and will range from 10% to 50%.
- 9 We reserve the right to limit the amount that may be transferred to the Guaranteed Interest Option if it would result in more than 25% of the Annuity Account Value to be in the Guaranteed Interest Option. The percentage limit may range from 10% to 100%.
- 10. The Free Withdrawal Amount may change and will range between 10-30%.
- 11. We may offer additional withdrawal charge schedules based on different years at different percentages on a Participation Year and Plan Level basis.
- 12. We may add, change or delete waivers.
- 13. We may change the administrative charge schedule and waive the charge at \$10,000 through \$50,000.
- 14. This statement will only appear if Participant consent is required.
- 15. We may add, delete or revise any of the acknowledgements listed.



## AXA EQUITABLE LIFE INSURANCE COMPANY

### **Memorandum of Variable Material for**

Group Enrollment Form No. EV STRAT 401(a) 2011 (and any variation thereof) for use with Group Certificate No. 2009401a901-[A or B] and any variation thereof.

The following comments describe the nature and scope of the variable material contained in the form. It is numbered to correspond to the order in which they appear in the bracketed areas on the form indicating that they may change.

## Group Enrollment Form No. EV STRAT 401(a) 2011

- 1. The marketing name for the product may be revised in the future to reflect product variations.
- 2. The address, web address, telephone numbers, the catalog number, any referenced forms' catalog number, and page footers of the form should be considered administrative in nature and are subject to change.
- 3. In Section 2, the information requested may be changed or added as a result of requirements of the U.S. Patriot Act.
- 4. In Section 6, the Segment Type(s) available under the Structured Investment Option from AXA Equitable will be listed here. Any time a Segment Type is listed here it has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from –5% to –50%.
- 5. In Section 6, the Separate Account Investment Options available from AXA Equitable will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
- 6. In Section 7 the Special Dollar Cost Averaging time periods may change or additional periods may be added. The periods may range from one to twenty-four months.
- 7. In Section 7, the Segment Type(s) available from AXA Equitable under the Structured Investment Option for use with Special Dollar Cost Averaging will be listed here. Any time a Segment Type is available it will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from –5% to –50%.
- 8. In Section 7, the Separate Account Investment Options available from AXA Equitable for use with Special Dollar Cost Averaging will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly
- 9. In Section 11, the customer service telephone number is subject to change.
- 10. In Section 11, the electronic delivery service may not be made available if the cost for the service exceeds the limitations set forth by the Company.

11.	AXA Equitable may need to add or revise questions of current operational and/or compliance requirements.	or make changes to the Representative Report based. If that is the case, the bracketed text will not appear	on :

# **Memorandum of Variable Material for**

Group Enrollment Form No. EV STRAT TSA 2011 (and any variation thereof) for use with Group Certificate No. 2008TSA901-[A or B] (and any variation thereof).

The following comments describe the nature and scope of the variable material contained in the form. It is numbered to correspond to the order in which they appear in the bracketed areas on the form indicating that they may change.

# **Group Enrollment Form No. EV STRAT TSA 2011**

- 1. The marketing name for the product may be revised in the future to reflect product variations.
- 2. The address, web address, telephone numbers, the catalog number, any referenced forms' catalog number, and page footers of the form should be considered administrative in nature and are subject to change.
- 3. In Section 1, the type of EQUI-VEST contract type references the markets (e.g. "Public School", "501(c)(3)" and "Colleges and Universities") may be added or removed to reflect the markets that are offered for new business.
- 4. In Section 3, the information requested may be changed or added as a result of requirements of the U.S. Patriot Act.
- 5. In Section 7, the Segment Type(s) available under the Structured Investment Option from AXA Equitable will be listed here. Any time a Segment Type is listed here it has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from –5% to –30%.
- 6. In Section 7, the Separate Account Investment Options available from AXA Equitable will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
- 7. In Section 8, the Special Dollar Cost Averaging time periods may change or additional periods may be added. The periods may range from one to twenty-four months.
- 8. In Section 8, the Segment Type(s) available from AXA Equitable under the Structured Investment Option for use with Special Dollar Cost Averaging will be listed here. Any time a Segment Type is available it will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the
  - Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from –5% to -50%.
- 9. In Section 8, the Separate Account Investment Options available from AXA Equitable for use with Special Dollar Cost Averaging will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
- 10. In Section 12, the customer service telephone number is subject to change.

- 11. In Section 12, the electronic delivery service may not be made available if the cost for the service exceeds the limitations set forth by the Company.
- 12. AXA Equitable may need to add or revise questions or make changes to the Representative Report based on current operational and/or compliance requirements. If that is the case, the bracketed text will not appear.

# **Memorandum of Variable Material for**

Group Employer Application No. 2011 EV STRAT EDC (and any variation thereof) for use with Group Contract No. 2009EDCGAC901 (and any variation thereof).

\_\_\_\_\_\_

The following comments describe the nature and scope of the illustrative and variable material in the Employer Application. It is numbered to correspond to the numbers that have been placed adjacent to the bracketed areas on the form indicating that they may change.

#### **Group Employer Application Form No. 2011 EV STRAT EDC**

- 1. We may change how the annual administrative charge is to be paid. The number of participants required in order to have the Plan pay the annual administrative charge may change. The number will range from 5-25.
- 2. The Plan Administrator's fee will only appear on the Application if there is indication that there is a Plan Administrator and we are instructed by the Employer to withdraw the fee from the Participant's account..
- 3. The frequency of Plan Contributions may change to weekly, monthly, quarterly or annually.
- 4. We may add additional transactions that the Participant may execute without Employer approval i.e. loans, withdrawals or surrenders.
- 5. We may revise the Sources of Contributions in the future based on changes in the Code or any regulations.
- 6. The frequency of Contribution statements may change and we may offer these statements on a weekly or annual basis.
- 7. We reserve the right to limit the amount that may be allocated to the Guaranteed Interest Option to no more than 25% of each Contribution. The percentage limit may range from 10% to 100%.
- 8. The percentage that may be transferred from the Guaranteed Interest Option may change and will range from 10% to 50%.
- 9. We reserve the right to limit the amount that may be transferred to the Guaranteed Interest Option if it would result in more than 25% of the Annuity Account Value to be in the Guaranteed Interest Option. The percentage limit may range from 10% to 100%.
- 10. The Free Withdrawal Amount may change and will range between 10-30%.
- 11. We may offer additional withdrawal charge schedules based on different years at different percentages on a Participation Year and Plan Level basis.
- 12. We may add, change or delete waivers.
- 13. We may change the administrative charge schedule and waive the charge at \$10,000 through \$50,000.
- 14. This statement will only appear if Participant consent is required.
- 15. We may add, delete or revise any of the acknowledgements listed.
- 16. The Investment Options then available from us will be listed here. The Investment Options, which apply, are Investment Options of our Separate Account A. If we at any time add, remove or limit the Options, of the Certificate, the list of Options to be included in the Data Pages will be changed accordingly.

# **Memorandum of Variable Material for**

Group Enrollment Form No. EV STRAT EDC 2011 (and any variation thereof) for use with Group Certificate No. 2009EDC901-[A or B] (and any variation thereof).

\_\_\_\_\_\_

The following comments describe the nature and scope of the variable material contained in the form. It is numbered to correspond to the order in which they appear in the bracketed areas on the form indicating that they may change.

#### **Group Enrollment Form No. EV STRAT EDC 2011**

- 1. The marketing name for the product may be revised in the future to reflect product variations.
- 2. The address, web address, telephone numbers, the catalog number, any referenced forms' catalog number, and page footers of the form should be considered administrative in nature and are subject to change.
- 3. In Section 2, the information requested may be changed or added as a result of requirements of the U.S. Patriot Act.
- 4. In Section 6, the Segment Type(s) available under the Structured Investment Option from AXA Equitable will be listed here. Any time a Segment Type is listed here it has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from –5% to –50%.
- 5. In Section 6, the Separate Account Investment Options available from AXA Equitable will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly.
- 6. In Section 7 the Special Dollar Cost Averaging time periods may change or additional periods may be added. The periods may range from one to twenty-four months.
- 7. In Section 7, the Segment Type(s) available from AXA Equitable under the Structured Investment Option for use with Special Dollar Cost Averaging will be listed here. Any time a Segment Type is available it will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits the Segment Type(s) available under the Structured Investment Option pursuant to the terms of the Contract, the list of Segment Type(s) will be changed accordingly. The Segment Duration may range from 1 to 10 Years and the Segment Buffer may range from –5% to –50%.
- 8. In Section 7, the Separate Account Investment Options available from AXA Equitable for use with Special Dollar Cost Averaging will be listed here. Any Separate Account Investment Option available at any time will be one that has been approved by the New York State Insurance Department. If AXA Equitable at any time, adds, removes, or limits Investment Options or changes the Separate Account pursuant to the terms of the Contract, the list of Investment Options will be changed accordingly
- 9. In Section 11, the customer service telephone number is subject to change.
- 10. In Section 11, the electronic delivery service may not be made available if the cost for the service exceeds the limitations set forth by the Company.

11.	AXA Equitable may need to add or revise questions of current operational and/or compliance requirements.	or make changes to the Representative Report based. If that is the case, the bracketed text will not appear	on :

# Memorandum of Variable Material for

Group Employer Application No. 2011 EV STRAT TSA (and any variation thereof). For use with Group Contract No. 2008TSAGAC901 (and any variation thereof).

\_\_\_\_\_\_

The following comments describe the nature and scope of the illustrative and variable material in the Employer Application. It is numbered to correspond to the numbers that have been placed adjacent to the bracketed areas on the form indicating that they may change.

# **Group Employer Application Form No. 2011 EV STRAT TSA**

- 1. We may add or delete Programs
- 2. We may change how the annual administrative charge is to be paid. The number of participants required in order to have the Plan pay the annual administrative charge may change. The number will range from 5-25.
- 3. We may change or add options available for catch-up contributions.
- 4. We may add additional events that will be permitted by the Plan. We may change or add vendors if contract exchanges are permitted.
- 5. We add or change the methods of payment permitted under the Plan.
- 6. We may revise the Sources of Contributions in the future based on changes in the Code or any regulations.
- 7. We may revise the Vesting Schedules and Periods in the future.
- 8. The frequency of Plan Contributions may change to weekly, monthly, quarterly or annually.
- 9. The frequency of the deduction of the administrator's fee may change to bi-weekly, semi-annually or weekly.
- 10. We may add additional transactions that the Participant may execute without Employer approval.
- 11. The frequency of Contribution statements may change and we may offer these statements on a weekly or annual basis.
- 12. Type of Employer Organizations may be deleted or added
- 13. We reserve the right to limit the amount that may be allocated to the Guaranteed Interest Option to no more than 50% of each Contribution. The percentage limit may range from 10% to 75%.
- 14. The percentage that may be transferred from the Guaranteed Interest Option may change and will range from 10% to 50%.
- 15. We reserve the right to limit the amount that may be transferred to the Guaranteed Interest Option if it would result in more than 50% of the Annuity Account Value to be in the Guaranteed Interest Option. The percentage limit may range from 10% to 75%.
- 16. The Free Withdrawal Amount may change and will range between 10-30%.
- 17. We may offer additional withdrawal charge schedules based on different years at different percentages on a Participation Year and Plan Level basis.
- 18. We may add additional waivers.
- 19. We may change the administrative charge schedule and waive the charge at \$10,000 through \$50,000.

- 20. This statement will only appear if Participant consent is required.
- 21. The Investment Options then available from us will be listed here. The Investment Options, which apply, are Investment Options of our Separate Account A. If we at any time add, remove or limit the Options, of the Certificate, the list of Options to be included in the Data Pages will be changed accordingly.
- 22. We may add, delete or revise any of the acknowledgements listed.

SERFF Tracking Number: ELAS-127280657 State: Arkansas
Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 49074

Company Tracking Number: 2011 EV STRAT 401(A)

TOI: A02.1G Group Annuities - Deferred Non- Sub-TOI: A02.1G.002 Flexible Premium

Variable and Variable

Product Name: Equivest

Project Name/Number: Series 901 Third Party Applications/2011 EV STRAT 401(a)

# **Superseded Schedule Items**

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule Item Name	Replacement Creation Date	Attached Document(s)
06/17/2011	Supporting Filing Letter Document	06/17/2011	AR EQ 901 TPA Filing Ltr Comick Lisa.pdf (Superceded)
06/17/2011	Supporting Filing Letter Document	06/17/2011	AR EQ 901 TPA Filing Ltr Comick Lisa.pdf (Superceded)



Lisa Comick Policy Drafting Manager Annuity Product Management & Filing

June 17, 2011

The Honorable Jay Bradford Commissioner Arkansas Department of Insurance 1200 W. Third Street Little Rock, AR 72201-1904

Attn.: Policy & Other Form Filings

RE: AXA Equitable Life Insurance Company

**NAIC No.:** 968-62944 **FEIN** 13-5570651

**Application form nos.** 2011 EV STRAT 401(a), 2011 EV STRAT EDC and 2011 EV STRAT TSA **Enrollment form nos.** EV STRAT 401(a) 2011, EV STRAT EDC 2011 and EV STRAT TSA 2011

#### Dear Commissioner:

We are filing with the Department for approval the above referenced application and enrollment forms. These are new forms and will not replace any existing forms.

Application form no. 2011 EV STRAT 401(a) and Enrollment form no. EV STRAT 401(a) 2011 will be in the 401(a) plan market.

Application form no. 2011 EV STRAT EDC and Enrollment form no. EV STRAT EDC 2011 will be used in the Employee Deferred Compensation (EDC) market.

Application form no. 2011 EV STRAT TSA and Enrollment form no. EV STRAT TSA 2011 will be used in the Tax Sheltered Annuity (TSA) market.

Form No.	For Use With Previously Approved Form
2011 EV STRAT 401(a)	Contract 2009401aGAC901, approved by the Department on 06/16/2009,
	under State Tracking no. ELAS-126181016
EV STRAT 401(a) 2011	Certificate 2009401a901-A, approved by the Department on 06/16/2009,
	under State Tracking no. ELAS-126181016
	Contract 2009EDCGAC901, approved by the Department on, 12/27/2004
2011 EV STRAT EDC	under State Tracking no. SERT-678QEH762
	Certificate 2009EDC901-A, approved by the Department on 12/27/2004,
EV STRAT EDC 2011	under State Tracking no. SERT-678QEH762
2011 EV STRAT TSA	Contract 2008TSAGAC901, approved by the Department on 12/19/2009,
	under State Tracking no. ELAS-125933118
EV STRAT TSA 2011	Certificate 2008TSA901-A, approved by the Department on 12/19/2009,
	under State Tracking no. ELAS-125933118

We are also enclosing a Memorandum of Variable Material for each of the Applications. Due to a recent change in law, the state of New York no longer requires filing of this type of form for use outside of New York. Instead, New York now requires that we file annually, a list identifying and describing the policy forms issued by us for delivery outside New York. The required filing fee will be sent by express mail or EFT. We request that information contained in this letter and any attachments hereto be treated as confidential and be exempted from disclosure in accordance with the state's Freedom of Information law or other similar laws, and we be notified prior to any proposed release of this information.

If you have any questions or need any additional information, please call me at (212) 314-3562 or Greg Prato at (212) 314-5710. Thank you.

Sincerely,

Lisa Comick

Policy Drafting Manager

sa f. Comick



Lisa Comick Policy Drafting Manager Annuity Product Management & Filing

June 17, 2011

The Honorable Jay Bradford Commissioner Arkansas Department of Insurance 1200 W. Third Street Little Rock, AR 72201-1904

Attn.: Policy & Other Form Filings

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2011 EV STRAT EDC	under State Tracking no. SERT-678QEH762	
	Certificate 2009EDC901-A, approved by the Department on 12/27/2004,	
EV STRAT EDC 2011	under State Tracking no. SERT-678QEH762	
2011 EV STRAT TSA	Contract 2008TSAGAC901, approved by the Department on 02/28/2005,	
	under State Tracking no. SERT-696QNK585	
EV STRAT TSA 2011 Certificate 2008TSA901-A, approved by the Department on 02/28/2		
	under State Tracking no. SERT-696QNK585	

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Sincerely,

Lisa Comick

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sa f. Comick